

DD No.

(d) Aadhar No.

தமிழ்நாடு உட<mark>ழ்கல்வியியல் மழ்நும் விளையாட்டுப் பல்கலைக்கழகம்</mark> TAMIL NADU PHYSICAL EDUCATION AND SPORTS UNIVERSITY

(Estd. by the Govt. of Tamil Nadu Under Act No. 9 of 2005)

Accredited with "B- Grade by NAAC

Melakottaiyur Post, Vandalur-Kelambakkam Road, Chennai - 600 127. Tamil Nadu, India. Tel: 044 - 27477906 E-mail: regtnpesu@gmail.com Website: www.tnpesu.org

APPLICATION FOR THE POST OF CONTROLLER OF EXAMINATIONS

Advertisement No.2402-2/TNPESU/Estb.,/R2/COE/2023

Write in English and CAPITALS.

Use only **Blue/Black Ball Point Pen**. Use of Green/Red Pen/Pencils prohibited.

Please affix

Date:

		anch:	your recent passport size photograph (Self Attested)
Amo	unt Rs.		
	GENERAL INFORMATION	ON OF APPLICANT	
01.	Full Name (in CAPITAL LETTERS)		
02.	Father's / Mother's / Husband's Name	<u>, </u>	
03.	(a) Date of Birth		
	(b) Age (as on 1st July 2023) (Attach S.S.L.C. certificates Annexure I) (c) Gender(appropriate)	Male/ Female/ Others	
04.	Place of Birth and Nativity (a) Place		
	(b) District		
	(c) State		
05.	(a) Nationality		
	(b) Religion		
	(c) Mother Tongue		
	(d) Community		
	(Attach self-attested copy of the community certificate as Annexure II) (∫appropriate)		
06.	(a) Address for communication		
	(b) E-mail (including alternate, if any) (c) Mobile No. (including alternate, if any)	<i>y</i>)	

07.	Verna	acular langu	uage studied				Stud	y	Tamil	English
		propriate)	J			F	SSLC			3
						-	HSC			
							UG			
							PG			
08.	Othe	r language:	To spe			(I		
					To read					
					To write					
09. P	resent	Position :								
a.	Desig	nation								
_	_									
b.	Orgar	nization								
C.	Pay S	cale								
d.		of appointr ent post	ment to the							
e.	(as or	Experience Date of adv ars and Mont	vertisement,							
10. (a			alifications (from	highest d	egre	e)			
					,					
S.No		Degree/ Diploma	Discipline	Un	itution / liversity tudied		ar of ssing		gular/Part ne/Distance / OUS	%of Marks/ CGPA
	(Att	tach self- atte	sted copy of ce	rtifica	tes as Annex	kure I	II)			
		her examin	ations passe	d, if	any					
S.	S.No. Name of the examinat			nation qua	alifie	ed		Month	& Year	
								+		

(Attach self- attested copy of certificates as Annexure IV)

11. Experience in previous and present employment (including Post-Doctoral Fellowship)

S.No.	Employer Position	Pay drawn	Period of employment					
0.110.	Employer	1 03111011	r dy drawn	From	To	Υ	М	D
	Total							

(Attach service certificates with salary details as Annexure V)

12. Administrative Experiences

(Registrar/ COE/ Principal/ Dean/ Director/ HoD/ Co-ordinator/ etc.)

			,						
S.No.	Institution	nstitution Position	Duration						
3.110.	IIISTITUTION	POSITION	From	То	Υ	М	D		
	Total								
				TULAT					

(Attach supporting documents as Annexure VI)

13. (a) Member in Academic bodies

(Syndicate/ Senate/ Academic Council/ BoS/ Selection committee/ etc.)

S.No.	Name of the Body Position		Institution	Duration					
3.110.	the Body	POSITION	Institution -	From	To	Υ	М	D	
	Total								

(Attach supporting documents as Annexure VII)

(b) Co-curricular services (Co-coordinator/Officer-NSS/NCC/YRC/etc.)

S.No.	Name of	Position	Institution	Duration				
3.110.	service	POSITION	IIISTITUTION	From	То	Υ	М	D
	Total							

(Attach supporting documents as Annexure VIII)

14. Research Contributions

(a) Research guidance

_ ` ` /		
Degree	Awarded	Submitted
Ph.D.		
M.Phil.		

(Attach award letters as Annexure IX)

(b) Projects obtained

S.No.	Title	Funding	PI/	Amount	Duration	Completed/
3.110.	Title	agency	Co-PI	Sanctioned	(in year)	Ongoing

(Attach sanction orders/UCs as Annexure X)

c) Institution/Department projects Associated (SAP/FIST/RUSA/etc.)

S.No.	Scheme	Funding	Institution/	Amount	Duration	Completed/
3.110.	Scrienie	agency	Department	received	(in year)	Ongoing

(Attach sanction orders as Annexure IX)

d) Intellectual Property Rights (Patents/Copy rights etc.)

S.No.	Title of the IPR	Type and Number	Date of award/publication

(Attach sanction orders as Annexure IX)

15. Research Publications

(a) Original Articles (Nos. only) (UGC CARE-Group I and II Journals only)

National		International	
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UGC-CARE Publication (Group I)	SCI/SCI-E/ SSCI (GroupII)	h-index (Scopus)	Total Citations (Scopus)	i10index (Google Scholar)	Cumulative impact factor

(Provide list of publications in national and international journals separately along with article first page which includes indexing details also as Annexure X in the form at provided)

(b) Books authored

S.No.	Author(s)	Title	Year of Publication	Name of the Publisher	ISBN

(Pages pertaining to ISBN and author's name to be enclosed as Annexure XI)

(c) Books edited

S.No.	Editors	Title	Year of Publication	Name of the Publisher	ISBN

⁽Pages pertaining to ISBN and author's name to be enclosed as Annexure XI)

(d) Book chapters

S.No.	Author(s)	Title	Name of the Book	Page No.& Year	Publisher	ISBN

⁽Cover page and chapter first pagesarting from recent to be enclosed as Annexure XI)

16. Events participated/ organized

a) Presentations made in Seminars/Symposium/Conferences/Workshops

S. No.	Particulars	National (in Nos.)	International (in Nos.)
i.	Invited talks/lead papers		
ii.	Papers presented by the applicant		

⁽Provide list in the given format and attach certificates as Annexure XII)

(b) Conference/ Workshop/ Seminar/ Symposium organized

(as Organizing Secretary/Convener/ Joint Secretary)

(Provide list in the given format and attach supporting documents as Annexure XIII)

i. International level (Nos.) :

ii. National level (Nos.) :

iii. State level(Nos.) :

(c) Training undergone

(other than mandatory refresher / orientation programmes)

S.No.	Title	Institution&	Pei	riod	Spansor	Knowledge
3.110.	ritie	Location	From To		Sponsor	Gained

(Attach supporting documents as Annexure XIV)

(d) Training organized (as Organizing Secretary/ Convener/ Joint secretary only)

C N -	S.No. Title	Institution &Location	Period		C	Amount	Knowledge
5.NO.			From	То	Sponsor	received	imparted

(Attach supporting documents as Annexure XIV)

17. Country visited for academic purpose only

S.No. Country		Period		Durnoso	Funding	Amount
3. NO.	Country	From	To	Purpose	Agency	Amount

(Attach supporting documents as Annexure XV)

18. Achievements

(a) Awards/Medals

S.No.	Name of the award/medal	Year	University/State/ National/ International

(Attach supporting documents as Annexure XV)

(b) Fellowships

S.No.	Name	Institution	Funding agency	Amount	Period	
3.110.	Name	mstitution	r driding agency	Amount	From	To

(Attach sanction orders as Annexure XVI)

19. Membership and position held if any in professional societies

S.No.	Name of the Professional body	Member/	Period	
3.110.	Maine of the Froressional body	Position	From	То

(Attach supporting documents as Annexure XVII)

Inter University	Inter State	Internationa

20. Sports / Games Participation/ Achievement Particulars to the candidate

21 . Your Vision for the TNPESU as Controller of Examinations (M	aximum 500 words)
21 Toda Vision for the TN 200 do Controller of Examinations (iii	aximam ooc words,

- 22. Is there any commitment to serve in any organization? If so, give details.
- 23. Whether any disciplinary/court cases pending (if yes, provide details)?
- 24. If appointed for the post, time required for joining the duty.
- 25. List three references intimately known to you with the address, e-mail and mobile number who concert if your professional competency (Relatives should not be included).

S.	Name of references and Designation	Address for Communication	E-mail	Mobile/Landline
No.				
1.				
2.				
3.				

DECLARATION

I hereby declare that all the statements made
this application are true, complete and correct to the best of my knowledge and belief and
the event of any of the information being found false or incorrect or any ineligibility being
etected before or after the interview, my candidature is liable to be cancelled and action
nitiated against me. Further, I declare that there are no criminal / departmental
roceedings pending / contemplated against me.
Place: Signature:
Date: Name and Designation:

RECOMMENDATIONS OF THE HEAD OF THE INSTITUTION

This application for the post of Controller of Examinations, Tamilnadu Physical Education and Sports University of Dr./Mr./Mrs./_______is forwarded to the Registrar, *Tamilnadu Physical Education and Sports University*, *Chennai* and the undersigned has no objection.

Signature with seal Head of the Institution/ Organization

NOTE: The confidential report of the candidate may be sent separately by forwarding authority on the same day in a separate cover. The cover containing the confidential report may be superscripted as "Confidential report of ____(name) applied for the post of Controller of Examinations".



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DATA SHEET FOR THE POST OF CONTROLLER OF EXAMINATIONS

(to be filled by the candidate)

Name of the Candidate					
Address for Communication With e-mail id and mobile number					
Educa	tional Qualification				
Date	of Birth		Year	Month	For Office use only
Age (a	s on last date of application)				
1.	Total Teaching Experience (as	on last date of application)			
		Principal/Head/Director			
2.	Administrative Experience	Registrar/COE/Dean			
		Co-ordinator/ Warden			
		Syndicate Member			
	Research Publications (UGC CARE Group I and II)		Numbers Only		For Office use only
3.		National			
		International			
	Conference / Seminar etc.	National			
4.	(Presented / Invited talk)	International			
		Invited talk			
5.	Conference/Seminar/ Workshop / Training Organized	3 day and above			
	(as Org. Secretary/ Joint Secretary/ Convener)	Less than 3 day			
,	Country visited for	Conference / Workshop			
6.	academic purpose only	Training/ Visiting Professor not less than five days			

		Funding Agency	PI/Co-PI	Amount (in Lakhs)	For office use only
7.	Projects				
		Total			
	Associated in obtaining funds like	No. of Projects assoc	iated		
	DST-FIST, UGC-SAP, RUSA etc.	Amount mobilized (in	ı lakh)		
	Research Guidance (in Nos)			Numbers only	For Office use only
8.		Ph.D. Awarded			
		M.Phil Awarded			
	Book(s)	Authored/Co-authore	ed		
9.		Edited/Co-edited			
		Chapters as one of the author			
	IPR	Patents/Copyright			
10	Awards from Govt./Govt. Recognized Bodies	State/National/Inter (UGC/DST/INSA/AIC ICSSR/ICMR/CSIR/N etc.)	CTE/DBT/		
	Co-curricular activities	NSS/YRC/RRC/NCC/ officer/etc.	NSS/YRC/RRC/NCC/Nodal		
11.	Membership in	Officer bearer			
	professional bodies	Member			

Evidences for the above details are to be produced at the time of interview

I certify that the information furnished above are true and correct to the best of my knowledge and belief. If there is any incorrect or false information having been furnished or that may come to light in due course. I find myself for such action as the University may decide.

f the (Candio	date
	f the (f the Candid

Name:



TAMILNADU PHYSICAL EDUCATION AND SPORTS UNIVERSITY

Chennai - 60127

CHECK LIST

(Please ensure that then closures are attached in order in all copies of application)

S.No.	Attachment	Particulars/Supporting documents	Page No.
1.		Duly filled-in application with demand draft	
2.		Duly filled-in datasheet	
3.	Annexure I	S.S.L.C certificate (Proof of date of birth)	
4.	Annexure I	H.S.C Mark statement	
5.	Annexure II	Community certificate	
6.	Annexure III	Educational qualifications from highest degree	
7.	Annexure IV	Other examinations passed	
8.	Annexure V	Experience in previous and present employment	
9.	Annexure VI	Administrative experiences	
10.	Annexure VII	Member in academic bodies	
11.	Annexure VIII	Co-curricular services	
12.	Annexure IX	Research contributions	
13.	Annexure X	Original articles	
14.	Annexure XI	Books Authored, Edited and Chapters	
15.	Annexure XII	Invited talks/Lead papers/Presented papers	
16.	Annexure XIII	Seminars/conferences/workshops/etc.	
17.	Annexure XIV	Training under gone/organized	
18.	Annexure XV	Country visited & Awards/Medals	
19.	Annexure XVI	Fellowships	
20.	Annexure XVII	Membership and position held in professional societies	

ANNEXURE - FORMATS

ANNEXUREX - ORIGINAL ARTICLES (Recent first)

Provide list of publications in national and international journals separately along with article first page in the following format:

Authors, Title of the paper, Journal Name, Vol. (Year) Page No. (Impact Factor, if any)
Annexure XII -Invited Talks / Lead Papers Delivered (Recent First)

S.No.	Title of the talk	Name of the event	National/ International	Date & Venue

Paper Presented by the Applicant (Recent First)

S.No.	Title of the presentation	Name of the event	National/ International	Date & Venue

Annexure XIII-Conferences/Seminars/Training Organized (Recent First)

C N	Title of the Institution	Period		National/		Amount	
S.No.	event	& Location	From	To	International	Sponsor	received