

ವಿಶ್ವೇಶ್ವರಯ್ಯ ತಾಂತ್ರಿಕ ವಿಶ್ವವಿದ್ಯಾಲಯ

("ವಿ ಟಿ ಯು ಅಧಿನಿಯಮ ೧೯೯೪" ರ ಅಡಿಯಲ್ಲಿ ಕರ್ನಾಟಕ ಸರ್ಕಾರದಿಂದ ಸ್ಥಾಪಿತವಾದ ರಾಜ್ಯ ವಿಶ್ವವಿದ್ಯಾಲಯ) "ಜ್ಞಾನ ಸಂಗಮ", ಬೆಳಗಾವಿ-೫೯೦೦೧೮, ಕರ್ನಾಟಕ, ಭಾರತ

Visvesvaraya Technological University

(State University of Government of Karnataka Established as per the VTU Act, 1994) "Jnana Sangama" Belagavi-590018, Karnataka, India Phone: (0831) 2498100, Fax: (0831) 2405467, Website: vtu.ac.in

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REGISTRAR Ref No:VTU/BGM/ECE/4/2021-22/ 893

Date 2 1 OCT 2021

NOTIFICATION

Applications are invited from the eligible candidates for the post of Guest faculty in the Dept. of ECE, VTU, Belagavi for the program M.Tech.-VLSI Design & Embedded Systems (for Odd and Even semesters) and Dept. of ECE, VTU, Mysuru for the program M.Tech.-Digital Electronics & Communication Systems (for Odd semester only) for the academic year 2021-22.

The interested candidates may send their applications in the enclosed format along with the Bio-Data and other relevant documents (attested) to the below address:

Dept. of ECE, VTU, Belagavi			Dept. of ECE, VTU, Mysuru		
	Design & Embedded ystems	No. of Post	M.Tech. –Digital Electronics & Communication System	No. of Post	
	Centre, chnological University a", Belagavi-590 018	01 (for odd & Even semesters)	Program Coordinator, Dept. of ECE, PG Centre, Visvesvaraya Technological University Hanchyasatagalli layout, Ring Road, Mysuru-570 029	01 (for Odd semeste Only)	

Separate applications needs to be sent to the respective address, if applying for both the programs.

The last date to receive the application: 29/10/2021 by 4.00 pm.

(The applications received after the last date will not be considered).

Registrar

Copy to:

- 1. The Chairperson/Program Coordinator, Dept.of ECE, VTU, Belagavi and Mysuru for information and needful.
- 2. The Hon'ble Vice Chancellor, through the Sec. to VC, VTU, Belagavi for kind information.
- 3. The Finance Officer, VTU, Belagavi for information.
- The Special Office, DPAR, VTU, Belagavi.
- *. The Director (I/c), ITISMU, VTU, Belagavi to upload the Notification on VTU website.



"ಜ್ಞಾನ ಸಂಗಮ", ಬೆಳಗಾವಿ-೫೯೦೦೧೮, ಕರ್ನಾಟಕ, ಭಾರತ

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APPLICATION FOR THE GUEST FACULTY POSITION IN THE

DEPARTMENT OF ELECTRONICS & COMMUNICATION ENGINEERING, VTU, BELAGAVI / MYSURU

Last Date to receive the application: 29/10/2021 by 4.00 pm

(Separate applications needs to be sent to the respective address, if applying for both the programs)

1	st Faculty Applied fo gram & Place) (Separat		(To	ppln.No. be filled in by ice) Program and Place, if a	applying for more than one)	Space for Photograph	
1.	Full Name (in Block letters) :						
2.	Address for corres	spondence :					
	Email Address:		Mobile No:				
3.	3. Nationality Age Date of birth (dd/mm/yyyy)						
4.	Details of Education Qualification:						
	Qualifying Examinations	Year of Passing	University / Institute	CGPA/ Total Marks obtained	Percentage with Class obtained	Specialization	
	SSLC / X class :						
	PUC II / XII class :		.1				
	Bachelors:						
	Masters:						
	Ph.D.			Thesis Title:			
5.	Attach the Caste certificate or Reservation certificate if belongs to SC/ST/ OBC/371J or other.						

	6. Research	/Teaching/Industrial Ex	perience in chr	onological orde	r.		
	SI. No.	Institute/Organisatio	n/Designation	Start Date	End Date	Total	Type of
	1			(dd/mm/yy)	(dd/mm/yy)	Period	work
	2						N A
	3						
7.	Awards/H	onours :					
-							
8.		n details (give numbers Il Papers (without revie		publications)		International	National
		varticles	w artches)				
	* Refere	ed International/Natior	nal Conference	Proceedings			
9.	Faculty Dev	velopment programme	in relevant area	a attended (giv	o numbous)		
9.	(Attach the	details)		attended (giv	e numbers)		
10.	Workshops	attended (give number	rs) (Attach the d	details)			
11.	No. of UG/F	PG students projects gu	separate				
		ame of the student, date/ perience: No.of years	year , title of the	thesis, Guide/Co	-guide)		11
12.		perience. No. or years					
	Courses taug	ght UG/PG level.					
13.	Any other re	levant information:					
4.	liet of F						
7.	List of Enclos	ures		1. 2.			
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			10	J.			
te:		Signatur	e of the applica	nt			
		Name of	the applicant				