

MANONMANIAM SUNDARANAR UNIVERSITY

State University

Date: 12.01.2022

Reaccredited with "A" Grade by NAAC (3rd Cycle)
Abishekapatti, Tirunelveli 627 012, Tamilnadu, India
Phone:0462-2338632, Fax:0462-2334363

e_mail: registrar@msuniv.ac.in, Website: www.msuniv.ac.in

Ref No.MSU/R/Estt/Admn/Advt/2022

Applications (in 5 copies) in the prescribed format are invited for the following posts:

1. REGISTRAR

2. CONTROLLER OF EXAMINATIONS

Application form, prescribed qualifications, general instructions and other details are available at the University Website www.msuniv.ac.in. The filled in application should be sent along with a Demand Draft for Rs.1000/-.

Last Date for receipt of filled in application form is 27.01.2022 upto 5.45 pm.

Note:

- Previous advertisements dated 17.12.2020 and 27.06.2021 stand cancelled.
- Only fresh applications against this advertisement will be considered.

Dr. R. MARUTHAKUTTI REGISTRAR i/c



MANONMANIAM SUNDARANAR UNIVERSITY

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Reaccredited with "A" Grade by NAAC (3rd Cycle) Abishekapatti, Tirunelveli 627 012, Tamilnadu, India

Ref. No. MSU/R/Estt/Admn/Advt/2022

Date: 12.01.2022

Applications (in 5 Copies) are invited in the prescribed format for the following posts

REGISTRAR (2) CONTROLLER OF EXAMINATIONS Name of the Post: (1) An academician not lower in rank than that of a Associate Professor in the Qualification University or in the affiliated Colleges with 15 years of teaching (as per Statute of experience. Manonmaniam Sundaranar 2. Knowledge of Tamil to the extent of carrying official correspondence and **University, Tirunelveli)** drafting reports. 3. Five years of administrative experience is desirable. Should be between 45 Years and 55 Years at the time of sending application. (The age restriction for the above posts shall be reckoned as on 1st July, Age 2022) **Term of Appointment** The term of appointment shall be for a period of three years **Pay Matrix** Level 14 with rationalized entry pay of Rs.1,44,200

General Instructions to send the application for the above posts:

- 1. The application form and other details can be downloaded from the University website: www.msuniv.ac.in
- 2. The filled in application should be accompanied with a Demand Draft for Rs.1000/- towards the application fee, drawn in favour of the Registrar, Manonmaniam Sundaranar University and payable at Tirunelveli. Money order / Postal order / Cheque/Cash will not be accepted.
- 3. The filled in application (5 copies) along with attested copies of educational qualifications, experience, etc., should be sent to the Registrar, Manonmaniam Sundaranar University, Tirunelveli, Tamil Nadu, India on or before 27.01.2022 upto 5.45 pm. and should be superscribed on the left hand corner of the envelope "Application for the post of ________".
- **4.** Separate application should be sent for each post in a separate cover along with Demand Draft.
- 5. Applicants should be prepared to come for an interview to be held at Abishekapatti, Tirunelveli 627 012 at their own cost.

- 6. Applicants for the post are required to submit their applications in the prescribed form in five copies, containing full particulars as age, qualifications, service details, community, degree(s) acquired with marks or grade(s), etc. In the application, the number or years of previous teaching experience as Reader / Associate Professor at undergraduate and postgraduate level (Certificate must be produced) and other academic distinctions, publications (one set to be sent which will not be returned), present occupation, salary certificate (basic pay and other allowances), Languages with which the applicant is conversant, must be mentioned.
- 7. Applicants in service should send their applications through proper channel along with a 'No Objection Certificate' obtained from their employer concerned. Pay certificate obtained from the employer should be sent by those who are presently employed, along with application or should be brought at the time of interview, without fail.
- **8.** Applicants who attempt to canvass or bring influence in any manner shall be disqualified.
- 9. Selected candidates shall be required to join duty immediately and enter into an agreement, with the University in accordance with the laws of the University.
- **10.** The University reserves the right to accept or reject any application.
- 11. Service rules are as per the rules of Government of Tamil Nadu / University.
- 12. Candidates should invariably fill in the information regarding court cases pending, criminal cases, disciplinary actions or equivalent etc., in the relevant column of the application form. Any changes in this information as and when occurred after the submission of application form till the completion of recruitment process should be brought to the notice of the University by the candidate, failing which the University reserves the right to cancel the candidature and to debar him/her from all selections.
- **13.** The University reserves the right to fill or not to fill up the post without assigning any reason what so ever.

Last Date for receipt of filled in application form is 27.01.2022 upto 5.45. p.m.

Tirunelveli – 627 012

Dr. R. MARUTHAKUTTI REGISTRAR i/c

Appl. No.	
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மனோன்மணியம் சுந்தரனார் பல்கலைக்கழகம் manonmaniam sundaranar university State University

Reaccredited with "A" Grade by NAAC (3rd Cycle) Abishekapatti, Tirunelveli 627 012, Tamilnadu, India

Demand Draft Particulars				
Bank and Branch				
D.D. No. / Date				
Amount				

Affix a recent Passport size Photograph with Signature

Application for the Post of		

(To be submitted in 5 Copies)

01	Name in full	TAMIL
	(in Block Letters)	ENGLISH
02	Father's Name	
03	Sex	
04	Marital Status	
05	Address for Communication with Pin Code (Phone No and e-mail ID, if any)	
	a) Age and Date of Birth (Christian Era)	
06	b) Place of Birth	
	c) District and State	
07	Nationality & Religion	
08	Name of the Community and Sub-caste and to state whether it is BC/FC/MBC/BCM/SC/ST/SC(A)	

09	If differ	-	bled, give								
10			 Languages (F	-lea	ase underline t	he r	mother tongue	e)			
Lang	guage	Read Only	Speak On	ly	Read and Spe	ak	Read, Write a	and	Exam	nination Pa	issed, if any
Tami	il										
Engli	ish										
Othe Spec											
11	a) Pa	rticulars	of Educatio	nal	l Qualifications	; 		_		_ 	
	Programme Institut		me of the stitution/ niversity	Mi	ajor Subject(s)		Regular / Part Time / Distance ucation / OUS	Ye	onth & ear of assing	Class	% of Marks
Ph.D.	- <u> </u>							 			
M. Pł	nil.							-			
PG _											
UG_					,						
HSC					,						
SSLC											
Othe	rs, if any	y									
(b)	Detail	s of Qua	lifying Level	Те	:st						
Name of the Qualifying Level Test Name of t		the Institution		Subject	[IV	/lonth & Ye	ear of passing			
NET											
SLET	/ SET					T					
12	Membership / Fellowship titles in Professional										

13	Title of the Thesis for the Research Degree(s):							
•	Degree		Subject					
M.Ph	il							
Ph. D								
_	other higher deg D.Sc., D.Litt., etc.,							
14	Employment det	ails						
I I INIVERSITY / L NIIEGE /		Designati held	ion	Date of Joining	te of Joining Date of Leaving			
* Service Certificate with present Salary details to be enclosed								
			i)	Graduate Level	y	rears		
15 Teaching Experience ii) Post Graduate Level years					ears			
			iii)	Others (specify)	У	ears		

16	Research Exper	rience	Total No of Years					
(a)	Research Guidance		Ph.D.	Complet	ed		On going	
(b)	Research Proje (details to be e		Comple	ted			On going	
(c)		th Publications / to be enclosed / ISSN Nos.)						
Papers presented in National / International Seminars, (d) Symposia, Conference and Workshops (Annexure may be enclosed)								
17	Administrative	Experience	[Years			
	Office / Institution Organization Post Held		Period of S		Service To	Monthly Pay Scale & Salary Last Drawn		Description of Work Done
18	Any other expe	rience that can be	counted					
19	Participation in extra-curricular and sports or athletic activities during your educational career							
20	20 Establishment of Departments / Divisions/Laboratories etc., (Proof to be enclosed)							
Sl.No. Acti		vity	I	nstitution /	Place		Dates	

21.	Patents / IPR Filed, granted and marketed (proof to be enclosed)							
SI.	Details of Inventions		Pa	Patents No.		Date & Countries If		
No.							marked, details:	
22.	Have you handl enclosed):	ed any Consultano	cy Activity /	Project a	nd / or Industry	Inter	ractions (Proof to be	
SI. No.	Title of t	he Project	Agency /	Duration of Industry consultancy wi date				
Have you conducted any extension / community/ Literacy activities in quantifiable terms?								
23.	(Proof to be end	-		manity/ L		.5 111	quantinable terms:	
SI. No.	Type of	activity	Period of	of activity Agency of collaboration			Outcome	
24	Travel Abroad ntries Visited	Duration of V	ricit .	Month 8	2 Voor	D.	urpose of Visit	
Cou	iitiies visiteu	Duration of v	1511	WIOIILII	x Teal	P.	arpose or visit	

25	Prizes, Awards, Special Adany	chievements, if		
26	The period of time require duty, if the post is offered	-		
27.	References (Should be pe applicant's character and	no are intimately acquainted with the		
	Name	Desig	nation	Address with E-mail and Phone No.

28. Any court case is made / pending against you (Criminal cases/ Disciplinary actions or equivalent etc.,). Give brief account of the case like nature of compliant, action taken etc.,

29. Enclosures (in the following order):

- i) First page of SSLC Book / Transfer Certificate
- ii) HSC Mark Statement
- iii) Degree Certificates starting from highest degree
- iv) Mark Statements for PG Degree(s) / M.Phil.
- v) NET/ SLET/ SET Certificate(s)
- vi) Community Certificate, if applicable
- vii) Service Certificate from the present employer
- viii) Copies of certificate(s) for previous employment
- ix) List of Publications
- x) Copies of Testimonials
- xi) Pension certificate, if being pensioner
- xii) Supportive documents / certificates for administrative experience claimed (Item 17)
- xiii) Separate No Objection Certificate to be obtained from the present employer
- xiv) Others

DECLARATION

I, declare that the facts stated above are true to the best of my
knowledge and belief and in the event of any defects or mistakes being found out in the above said
informations of mine, my application is liable to be rejected.
I do hereby agree that disputes of any nature arising out of the consideration of application or
matters connected therewith shall be redressed by arbitration in accordance with Arbitration and
Conciliation Act 1996 as amended from time to time. Such arbitration shall be prescribed over by a sole
arbitrator to be nominated by the University. The decision of the arbitrator shall be final and binding on the
applicants.
Place:
Date:
Signature of Applicant
REMARKS OF FORWARDING AUTHORITY:
Place:
Date:
Signature with Seal

DATA SHEET

Name of Post Applied For : REGISTRAR / CONTROLLER OF EXAMINATIONS

01.	Name of the Applicant						
02.	Date of Birth :	Age:		Sex: Ma	ale / Fem	nale	
03.	Community	GT, BC, BCM, MBC, SC	c, SC (A), ST	•			
		Qualific	ation				
	Name of the Degree Year of Passing		g	Percent	tage of N	/larks / Class	
04.	PG						
	M.Phil.						
	Ph.D.						
05	NET / SLET/ CSIR						
		Additional Qા	ualification				
	Name of the Degree	of the Degree Year of Passing				/larks / Class	
06.	D.Sc.						
	Fellowship						
	Titles						
=	Awards						
	Teaching / Research exp.	ing / Research exp. UG yrs PG:			Res. Guidance:		
07.	Guidance (M.Phil /Ph.D.)			M.Phil:			
07.	Guidance (W.Filli / Fil.D.)			Ph.D.			
	Experience Academic: years			Administration years			
08.	Post Doctoral Research	National :		Internation	nal	years	
	Experience	years Regional Journals/				ternational	
09.	Publications:	Books		Journal / oks		irnal/books	
•		Nos.		Nos.		Nos.	
	Organization of						
10.	Depts/Conference :						
	Labs / Depts Nos.	Conference	e N	Nos.			
11.	Conference, Seminar, Workshop participated:						

	Regional Nos.	National Nos.	International Nos.				
12.	Research Project conducted and	d Fund generated in Rs.					
13.	Patents granted Nos.	Consultancies ha	andled Nos.				
14.	Present Position						
15.	Pay / Pay Matrix						
16.	. Address to which communication is to be sent with Phone No. and E.mail ID:						
I	declare that the details given ab	ove are correct and I stand respo	nsible for their validity.				
Date:		Sign	ature of the Applicant				
Note:	This coding sheet should be fille fail.	d in by the applicant and submit	along with application without				
		For Office use only					
	Verified Comments, if any						
	Asst./Superintendent		Deputy Registrar				