

DECLARATION FORM : 2018-19 - FACULTY

(Note : It is responsibility of Dean, HOD & faculty to submit only the declaration form of faculty who has not appeared for assessment in any other college during the academic year and working as full time)



- 1.(a) Name : **Dr. Jayita Poduval**
- 1.(b) Date of Birth & Age : **13-11-1969, 47 years**
- 1.(c) Submit Photo ID proof issued by Govt. Authorities :
Photo ID submitted :
Passport copy / **PAN Card** / Voter ID / Aadhar Card

Number XXXXXXXXXX Issued by Income tax department

Note: 1) Without Photo ID, Declaration form will be rejected and will not be considered as teaching faculty. 2) Original Certificates are mandatory for verification. All Certificates/Documents/Certified Translations, must be in English

- 1.(d) i. Present Designation : **Associate Professor**
- 1.(d)(i)a Certified copies of present appointment order at present institute attached.
- 1.(d)ii. Department : **ENT**
- 1.(d) iii. College : **Pondicherry Institute of Medical Sciences**
- 1.(d)iv. City : **Pondicherry**
- 1.(d) v. Nature of appointment: (a) Regular / Contractual / Adhoc : **Regular**
(b) Full time /Part time /Honorary: **Full time**
(c) With or Without Private Practice: **Without**
- 1.(d)vi. Date of appearance in Last MCI - ~~UG/PG/Any Other Assessment~~ **21-08-2017**
in which college **Pondicherry Institute of Medical Sciences**
- 1.(d)vii Whether appeared and accepted in Last MCI - UG/PG Assessment in the same Institute - Yes/~~No~~
- 1.(d)viii Whether appeared and accepted in Last MCI - UG/PG Assessment on same Designation - Yes/~~No~~
- 1.(d)ix Whether you have retired from Government medical college - Yes / **No** If Yes, Designation_____

3 (a). Details of the teaching experience till date.

| Designation | Department | Name of Institution | From DD/MM/YY | To DD/MM/YY | Total Experience in years & months |
|---------------------|------------|---|---------------|-------------|------------------------------------|
| Junior Resident | ENT | MUMBAI, SETH G.S, Medical College | 1994 | July 1997 | 3 years |
| Senior Resident | | | | | |
| Tutor | | | | | |
| Assistant Professor | ENT | Pondicherry Institute of Medical Sciences | 11.08.2008 | 30.07.2010 | 2 years |
| | | Pondicherry Institute of Medical Sciences | 06.06.2011 | 16.06.2014 | 3 years |
| Associate Professor | ENT | Pondicherry Institute of Medical Sciences | 17.06.2014 | Till date | |
| Professor | | | | | |

Note:- Tutor / Resident working in Anesthesia and Radio-diagnosis must have 3 years teaching experience in the respective departments in a recognized/permitted medical institute to be consider as senior resident.

3(b). To be filled in by Ex Army Personnel only: NOT APPLICABLE

| S.No. | Designation | Institution | Period | |
|-------|-----------------------|-------------|--------|----|
| | | | From | To |
| 1. | Graded Specialist | | | |
| 2. | Classified Specialist | | | |
| 3. | Advisor | | | |

Note: Have you been considered in any UG/PG inspection at any other institution/medical college during last 3 years. If yes, please give details. NO

4. Before joining present institution I was working at _____ as _____ and relieved on _____ after resigning.