



**THE GANDHIGRAM RURAL INSTITUTE**  
(Deemed to be University)

GANDHIGRAM – 624 302 :: DINDIGUL DISTRICT :: TAMIL NADU

Ministry of Education (Shiksha Mantralaya), Govt. of India  
Accredited by NAAC with 'A++' Grade (4<sup>th</sup> Cycle)

**Walk-in-Interview Notification for  
Engaging of Assistant Librarian (Temporary)**

**Date: 15.10.2025**

**Time : 10.30. a.m**

**Venue: Indira Gandhi Block**

**Instructions**

1. The Candidates are informed to download the **Application Proforma** and bring the filled-in form at the time of Interview.
2. The Candidates are informed to provide **original evidence** of the particulars at the time of interview without fail.
3. The candidates are informed to appear **one hour before** the time allotted.
4. The University reserves the right to fill or not to fill the vacancies.

School / Department / Centre	Qualification
Dr.G.Ramachandran Library	<p>A Master's Degree in Library and Information Science with at least 55% marks with <b>NET/SLET/Ph.D.</b></p> <ol style="list-style-type: none"><li>1. Knowledge in Library Automation (KOHA Software)</li><li>2. Familiarity in MARC Format</li><li>3. Knowledge of Computerization of Library</li></ol>



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## Application Proforma for the engaging of Guest/Part-Time Teachers

Name of the Post applied : \_\_\_\_\_

School/Department/Centre : \_\_\_\_\_

Photo

1.	Name of the Candidate	
2.	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/>
3.	Community	SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> UR <input type="checkbox"/>
4.	Date of Birth	DD / MM / YYYY Age _____ (as on 01-07-2025)
5.	Address for Communication	
		Pin Code: _____
	Cell No:	
	E-mail:	
	PAN	
	Aadhar No. (copy to be enclosed)	
6.	<b>Educational Qualification:</b>	
	Graduation (Name of the Degree with Major)	( _____ %)
	Post Graduation (Name of the Degree with subject)	( _____ %)
	M.Phil. (Specialization/Branch & Year) with subject	( _____ %)
	Ph.D. (Specialization/Branch & Year)	
	Post-Doctoral experience (indicate period & the Institution)	
	NET with JRF /NET/SLET / SET/ICAR (Reg. No. & Year)	

7.	<b>Details of Teaching Experience</b>				
	<b>Name of the post held</b>	<b>Name of the University / Institute / Organisation</b>	<b>Period of service(s)</b>		
			From	To	Total
	i)				
	ii)				
	iii)				
	<b>Total</b>		<b>Years: _____ Months: _____</b>		
8.	<b>Research contributions made*</b>				
	a) Total no. of research articles in UGC CARE listed journals / SCI journals				
	b) No. of books authored				
	c) No. of chapters in books authored				
	d) No. of presentations in the International conferences				
	e) No. of presentations in the National conferences				
	f) Details of patents (if any)				
	g) h-index				
	h) Total no. of citations				
9.	<b>Awards / Honors received (if any)</b>				

\* Scanned copies of the proofs may be attached wherever necessary.

Signature of the Candidate

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**Specific Remarks of the Dean / Head / Director :**

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**FOR OFFICE USE ONLY**

The qualification and specialization prescribed by UGC along with experience is verified with the original certificates and found correct. He / She is eligible to attend the interview.

1.

2.

3.

(Name & Signature)

(Name & Signature)

(Name & Signature)