



VIDYASAGAR UNIVERSITY

P.O.: Vidyasagar University, Midnapore-721102, Dist.: Paschim Medinipur,
West Bengal, INDIA.

Ref. No: VU/R/1011/2024

Date: 08.07.2024

NOTIFICATION

This is to notify for general inform of all concerned that the Government of West Bengal has started awarding "*Shiksha Ratna*" to the outstanding Principals and Teachers (*Preferably Professors and Associate Professors*) of the Colleges under Vidyasagar University. Therefore the Vidyasagar University invites application on the format enclosed herewith from the eligible Principals and Teachers (*Preferably Professors and Associate Professors*) working in the colleges under the affiliation of Vidyasagar University for recognizing exceptional work done by the Teacher Educator. Interested Principals and Teachers (*Preferably Professors and Associate Professors*) of the affiliated colleges of Vidyasagar University are requested to apply on the formant enclosed herewith *within 15th July, 2024* and submit at the Office of the Registrar, Vidyasagar University.

All concerned are being informed accordingly.

This is issued with the approval of competent authority.

Sd/-
Registrar

Memo No. VU/R/Off-Or./1011/2024 Dated: 08.07.2024

Copy forwarded for information and necessary action to:

1. The Deans of the faculty concerned,
2. The Inspector of Colleges – with a request to circulate the notification among all the Principals and TICs of the affiliated Colleges,
3. The Information Scientist for wide circulation in the University Website
4. The Secretary to the Vice-Chancellor- for kind information to the Hon'ble Vice-Chancellor, VU
5. The Office Supdt, Registrars' Office,
6. Establishment Section,




Registrar
Registrar,
Vidyasagar University
Midnapore-721102

Tele-Fax (03222) 298220, Fax: (03222) 275329,
E-mail: registrar@mail.vidyasagar.ac.in

**FORMAT FOR SUBMISSION OF BIO-DATA OF THE NOMINEES OF
SHIKSHARATNA 2023**

1. NAME:
2. RESIDENTIAL ADDRESS:
3. MOBILE NO.:
4. EMAIL ID:
5. PRESENT DESIGNATION:
6. ACADEMIC QUALIFICATIONS:

Examination	Board/Council	% of Marks obtained	Name of the Specialized subject	Division/Class	Year of passing

Add Row(s)

7. TEACHING EXPERIENCE:

Sl.	Position held	Institution	From (date)	To (date)
1.				
2.				

Add Row(s)

8. PUBLICATIONS:

- a) BOOKS/ BOOK CHAPTERS:

Sl.	Title	Sole Authorship/Edited	Name of the Publisher	Year of Publication	ISSN/ISBN No.
1.					
2.					

Add Row(s)

- b) ARTICLES:

Sl.	Title	Whether National or International	Corresponding Author (Yes or No)	Name of the Journal	Name of Publisher	Year of Publication	DOI No./Vol./Page	Impact Factor (if any)
1.								
2.								

Add Row(s)

9. RESEARCH GUIDANCE: *Details to be given;*

10. WHETHER AWARDS (NATIONAL / INTERNATIONAL) RECEIVED; if yes, give details;

11. NO. OF PATENTS (FILED / HELD); *Details to be given;*

12. MEMBERSHIP OF PROFESSIONAL BODIES: *if yes, give details;*

13. ANY OTHER DETAILS:

14. WHETHER SIKSHARATNA AWARD RECEIVED EARLER:

Signature of the Teacher

Countersigned by the Registrar