

**SRI AUROBINDO COLLEGE (EVENING)**

**(University of Delhi)**

**Malviya Nagar**

**New Delhi - 110017**

**OPTION FORM**

**PROMOTION OF TEACHERS**

I hereby opt the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ scheme in terms of clause 6.3 of University Grant Commission (Minimum Qualifications for Appointment of Teachers and other Academic Staff in Universities and Colleges and other measures for the Maintenance of Standards in Higher Education) regulations, 2018 for promotion from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

My details are as under:

|  |  |  |
| --- | --- | --- |
| S.No | Particulars | Details |
| 1. | Name |  |
| 2. | Department |  |
| 3. | Date of Initial Appointment |  |
| 4. | Present Designation |  |

**Date: Applicant’s Signature**