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## ಕೃಷಿ ವಿಜ್ಞಾನಗಲ ವಿಶ್ವವಿದ್ಯಾಲಯ, ರಾಯಚೂರು

[ICAR, NAAC accredited and UGC u/s 12(B) & 2(f) approved]



ಕುಲಸಚಿವರ ಕಾರ್ಯಾಲಯ

ಲಿಂಗಸೂಗೂರು ರಸ್ತೆ, ರಾಯಚೂರು-584 104

ಸಂ: ಕುಸ/ಕೃವಿವಿರಾ/431 /2023-24

ದಿನಾಂಕ: 12.08.2023

### ಸುತ್ತೋಲೆ

ವಿಷಯ: ಸಿ.ಎ.ಎಸ್-2016 ರ ಅಡಿಯಲ್ಲಿ ಶಿಕ್ಷಕರ ಪದೋನ್ನತಿಗೆ ಅರ್ಜಿ ಸಲ್ಲಿಸುವ ಕುರಿತು.


ಉಲ್ಲೇಖ: ಈ ಕಛೇರಿ ಅಧಿಸೂಚನೆ ಸಂ: No. R/UASR/CAS-2016 /2023-24 Date: 01-08-2023

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ಕೃವಿವಿ., ರಾಯಚೂರಿನಲ್ಲಿ ಸಿ.ಎ.ಎಸ್-2016 ರ ಅಡಿಯಲ್ಲಿ ಶಿಕ್ಷಕರ ಪದೋನ್ನತಿಗೆ ಅರ್ಜಿ ಸಲ್ಲಿಸಲು ಉಲ್ಲೇಖಿತ ಅಧಿಸೂಚನೆ ಹೊರಡಿಸಲಾಗಿರುತ್ತದೆ ಹಾಗೂ ಸದರಿ ಅಧಿಸೂಚನೆಯಲ್ಲಿ ಎಲ್ಲಾ ಪದೋನ್ನತಿ ಶ್ರೇಣಿಗಲಿಗೆ ನಿಗದಿತ ನಮೂನೆಯಲ್ಲಿ ತ್ರಿ ಪ್ರತಿಯಲ್ಲಿ ಅರ್ಜಿ ಸಲ್ಲಿಸಲು ಸೂಚಿಸಲಾಗಿತ್ತು. ಮುಂದುವರೆದು, ಈ ಮೂಲಕ ತಿಳಿಸುವುದೇನೆಂದರೆ, ಅಕಾಡೆಮಿಕ್ ಲೆವೆಲ್ 10 ರಿಂದ 11, 11 ರಿಂದ 12 ಪದೋನ್ನತಿಗಲಿಗೆ ನಿಗದಿತ ನಮೂನೆಯಲ್ಲಿ ಎಲ್ಲಾ ದಾಖಲೆಗಲೊಂದಿಗೆ ಒಂದು ಪ್ರತಿ ಅರ್ಜಿಯನ್ನು ಸಲ್ಲಿಸುವುದು.

ಹಾಗೆಯೇ, ಸಹ ಪ್ರಾಧ್ಯಾಪಕರು (ಅಕಾಡೆಮಿಕ್ ಲೆವೆಲ್ 13ಎ) ಪ್ರಾಧ್ಯಾಪಕರು (ಅಕಾಡೆಮಿಕ್ ಲೆವೆಲ್ 14) ಹಾಗೂ ಹಿರಿಯ ಪ್ರಾಧ್ಯಾಪಕರಿಗೆ (ಅಕಾಡೆಮಿಕ್ ಲೆವೆಲ್ 15) ಗಲಿಗೆ ತ್ರಿ ಪ್ರತಿಗಲಲ್ಲಿ ಅರ್ಜಿಯನ್ನು ಸಲ್ಲಿಸುವುದು.

ಇನ್ನುಳಿದಂತೆ, ಉಲ್ಲೇಖಿತ ಅಧಿಸೂಚನೆಯಲ್ಲಿ ಯಾವುದೇ ಬದಲಾವಣೆ ಇರುವುದಿಲ್ಲ.

  
ಕುಲಸಚಿವರು  
ಕುಲಸಚಿವರು  
ಕೃವಿವಿ ರಾಯಚೂರು  
ಕೃಷಿ ವಿಜ್ಞಾನಗಲ ವಿಶ್ವವಿದ್ಯಾಲಯ  
ರಾಯಚೂರು-584 104.

ಪ್ರತಿಯನ್ನು : ಕೃವಿವಿ ಎಲ್ಲಾ ಅಧಿಕಾರಿಗಲು / ನಿಯಂತ್ರಣಾಧಿಕಾರಿಗಲು ಕೃವಿವಿ., ರಾಯಚೂರು.  
: ವಿಶ್ವವಿದ್ಯಾಲಯದ ಎಲ್ಲಾ ವಿಭಾಗದ ಮುಖ್ಯಸ್ಥರುಗಲಿಗೆ.

**ANNEXURE -I****PROFORMA FOR SUBMITTING WORK-DONE REPORT FOR  
PROMOTION OF TEACHERS UNDER CAS-2016****GENERAL**

1.	Name of the Teacher	
2.	Designation	
3.	Place of work	
4.	Date of appointment in the University	
5.	Date of obtaining Ph.D.	
6.	Date of entry into:	
	i) Academic Level 10	
	ii) Academic Level 11	
	iii) Academic Level 12	
	iv) Academic Level 13A	
7.	Assessment period	From: _____ To: _____
8.	Details of work-done (enclosed)	

**Place:****Date :****Signature**

**WORK-DONE REPORT**  
(To be filled in by the concerned Teacher)

*Important Note:*

1. All components of work-done should be listed year-wise for the Assessment Period.
2. All claims must be supported by relevant documents/ certificates.
3. Reprints of all publications must be enclosed.
4. In the case of promotion from Academic Level 13A to Academic Level 14 research publications relating to the period after being placed in the Academic Level 13A should be listed and enclosed.

**I. Specific Achievements in Teaching/ Research/ Extension work under Assessment Period**

**1. Teaching**

**a) Courses offered**

Sl. No.	Sem-ester	Year	UG / PG / Diploma / Certificate		Course No.	Offered at place of working or outside	Credit hrs.	Contact hours/ week
			*Shared	Independent				

\* Experiential Learning.

**b) Guidance to PG students as Chairman of the Advisory Committee**

**(i) Master's Degree**

Sl. No.	Name of the Student	Department	Year of Completion

**(ii) Ph.D. Degree**

Sl. No.	Name of the Student	Department	Year of Completion

c) As Member of the Advisory Committee of M.Sc. and Ph.D. degree students

Sl. No.	Name of the Student	M.Sc./Ph.D.	Department	Year of Completion

d) Teaching aids developed (laboratory manuals, RAWE manuals, AV Aids etc.)

Sl. No.	Details of Teaching Aids	Course Number	Credit Hours	UG/PG/Diploma/Certificate Course	Year

e) Acting as External Examiner for UG/PG examinations (which include paper setting, paper corrections, conducting viva-voce etc.)

Sl. No.	Details of UG/PG examinations	Year

## 2. Research

a) (i) Trials/Experiments/Studies conducted / Testing of implements and equipments (year-wise)

Title	PI / Co-PI	University / AICRP/ Testing trial	Year

ii) Breeder / Foundation seed production per quintal/ Certified / TL Seeds produced per ton / planting material produced per 1000

Type of Seed/ Planting Material	Leader/Co-Leader	Quantity Produced	Year

### III) Mushroom /Bioagents/Bio fertilizers

Bio-agents/ Mushroom/ Bio-fertilizers	Leader/Co-Leader	Quantity Produced	Year

b) Ad-hoc Projects (Externally funded) - for each project total outlay

Title of the	Competitive/	PI/Co-PI	Funding	Period	Outlay

Project	Institutional		Agency		(Rs.)

**c. Patents/ Varieties notified/ Prototype developed/ Varieties endorsed/Technology developed/ germplasm registered at national level**

Title	Details	PI/Co-PI	Meeting in which proposed	Date of approval/ Notification
Patents				
Varieties notified				
Prototype developed				
Varieties endorsed				
Technology developed				

**d. (i) Establishing institutional facilities**  
(Testing laboratory/ bio-control agents production lab etc.)

Title	Details	Leader/Co-Leader	Year of establishment

**(ii) Managing institutional facilities**

Title	Details	Leader/Co-Leader	Period

**e) Compilation/preparation of Annual Research Report/QRT report**

**3. Extension**

**a) Transfer of Technologies**

**(i) Farm Trials/ Demonstrations/ On-Farm Testing/Campaign**

Particulars	Title	Season / Date	Place	Leader / Associate
1. Farm Trials				
2. Demonstrations				

3. On-Farm Testing				

**ii) Field Days/ Krishi Melas/Exhibitions/ Discussion Meetings/FFS & Similar Works**

Particulars	Title	Season / Date	Place	Leader / Associate
1. Field day				
2. Krishimela				
3. Exhibition				
4. Discussion Meetings				

**iii) Consultancy services (based on documentation)**

Sl. No.	Person/ Organization to whom Consultancy provided	Date	Place

**b) Training programmes organized**

**(i) Up to one week duration**

Sl. No.	Name of the Training Programme	Duration with dates	Place	Leader / Associate

**(ii) More than one week duration**

Sl. No.	Name of the Training Programme	Duration with dates	Place	Leader / Associate

**(c) Resource Person in Training Programme / Refresher Course/ Winter/ Summer Schools/NSS/RAWE etc.**

Sl. No.	Name of the Programme	Date	Place	Topic


**d) Participating as Resource Person in bi-monthly Technical Workshop or campaign**

Sl. No.	Title of the Meeting	Season	Date	Place

**e) Diagnostic visit to farmers fields / family/ units / Radio / Television Talk**

Sl. No.	Particulars	Season	Date	Place

**f) Feedback to research based on which research formulations have been made**

Sl. No.	Details of Feedback provided	Date	Place	Details of Research Formulations

**g. Income generated out of Revolving Fund**

Sl. No.	Name of the Activity	PI/Co-PI	Income Generated (Rs.)	Period

**h. Development of Video/Radio programmes on technologies developed by self (Nos.)**

Title of Video/Radio Programme	Leader/Co-Leader	Period

**4. Designated Corporate Activities**

Farm Superintendent/ Asst. Horticulturist/ Technical Assistant/ Technical Officer to Officers/Asst. Professor (Documentation)/ Asst. Editor/ Assoc. Editor/Information Specialists/ Audio Visual Specialist/ DDSW /Asst. Director of Student Welfare/ Working at PME cell or PPMC/Curator/ Manager ATIC/Training / Extension consultant /Controller of external examination / Extension Co-ordinator, DAESI, Co-ordinator / Teachers in Bakery Training Unit, Teachers working in Department of Kannada/ Teachers working in Agricultural Clinic and Agricultural business centres / teachers involved in selection and documentation. <b>Any other corporate activities certified by the University authorities.</b>	Based on the evaluation by the immediate superior/ controlling officer, marks may be allotted for performance in the designated activity of the teacher at the rate of 5 marks per year.
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Sl.No.	Activity	Duration

## II. Publications: Papers published during the assessment period

<b>a) Full length papers in refereed journals/</b>				
Authors	Year	Title of the paper	Journal and details	
<b>b) Research Note/Abstracts published in Journal/ Seminars/Symposia/ Conferences</b>				
Authors	Year	Title of the paper	Journal/ Seminars/Symposia/ Conferences details	
<b>c) Full length papers presented &amp; published in Seminars/Symposia/Conferences*</b>				
Authors	Year	Title of the paper	Journal/ Seminars/Symposia/ Conferences details	
<b>d) Research Bulletins/Extension Bulletins/ Chapters in Books published by Universities/National Institutes/ Govt. Departments/ Standard Commercial Publishers/ Training Manuals/ Laboratory Manuals</b>				
Authors	Year	Title	Details of Journals, Symposia, Workshop, Training etc.	
<b>e) (i) Books published by recognized publishers with ISBN</b>				
Authors	Year	Title of the Book	Publishers with ISBN	
<b>(ii) Chapters in standard books with ISBN</b>				
Authors	Year	Title of the Book	Title of the Chapter	Publishers with ISBN
<b>(iii) Books published individually</b>				
Authors	Year	Title of the Book	Publisher	



<b>(iv) Extension leaflets/Folders/Brochures Published by Universities/National Institutes/Govt. Departments</b>			
Authors	Year	Title of Bulletin	Publishers
<b>c) (i) Research Note/ Communication in Journal/ Abstract in Symposium/ Seminar/ Workshop/ Training Manual/ Proceedings of Workshop</b>			
<b>(ii) Popular articles published in leading Dailies/Institutional/Govt. Dept.-Periodicals/ Radio talks/TV programmes / Phone-in programmes</b>			
Authors	Year	Title	Details of publication
<b>d) Any other publications</b>			
<b>i) As Author / Compiler of POP /Editor</b>			
Sl.No.	Year	Name of the Publication	Title and details of publication
<b>(ii) As Assoc. Editor / Asst. Editor/Publisher/ Compiler of other publications</b>			
Sl.No.	Year	Name of the Publication	Title and details of publication

\* *Note: Translation books carry 50% marks.*

**Note:**

(a) *All the publications mentioned above should have been published as on the last date prescribed for submission of filled-in application.*

(b) *The first three authors in all the above cases will get full marks while the rest of the authors will get 50 per cent of the marks allotted to each item.*

### **III. International Exposure (visits/trainings/courses etc.)**

Sl.No.	Place & country visited	Purpose	Date	
			From	To

### **IV. Summer Schools/ Winter Schools/ Refresher Course/Special Training / Symposia/ Seminar/ Workshop/ Conference**

(a) **Organizing Summer School/ Winter Schools / Refresher Courses/Special Training/ Symposia/ Seminar/ Workshop/Conference** (For organizing each activity as in the title up to 10 days duration and More than 10 days duration)

(Associate members involved in organization of above activities get 50% marks/activity))

Sl. No.	Title	Place	Date	Sponsored by	Organizer/ Associate

(b) For participation in Summer School/Winter School/ Refresher course/ orientation course of 21 days duration during the assessment period (on contact mode)

Sl. No.	Title	Place	Dates	Sponsored by

(c) Participation in Special Training/ Orientation Programmes/ Symposia / Seminars / Conferences, Workshops etc. (except Annual Workshop)

Sl. No.	Title	Place	Dates	Sponsored by

(d) Creative / Innovative achievements in teaching / research / Extension

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#### V. Awards/ Distinctions Received

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Sl. No.	Title	Awarded by	Level*	Year of Award

\* International / National / State / University / Professional Society

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#### VI. Corporate / Other Activities

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a) Activities performed as External Examination Coordinator / Associate Coordinator/ Chief Warden / Wardens/ Staff Advisor/ Tour Leader and Co-Tour leader (State/All India)/ Programme Officer – NSS / Indian Redcross Society / NCC Officer/ Farm Management/ Academic, General, Financial Management (as AAO/AR/AC/Asst. Librarian etc.)/ Scrutinizing UG/PG grades .P.G.co-ordinator/seminar incharge. Leader / member in monitoring team.

b) Activities performed as Member - Co-chairman – Chairman of different committees of National – International – activities/ RAWE – Assoc. Coordinator – participation in RAWE camp/ Internship/ Tournament Organized/ Spl. Officer of SC-ST Cell/ Minority Cell/ Technical Assistant (Part-time)/ Students Counselor/ Leader for exposure visit of Farmers/ Liaison Officer for BOM Members' Official tours / VIP's official tours assigned by the University/ Participation in Melas/ Exhibitions at State, National, International levels representing University/ Member/ Co-Chairman in different committees of UAS activities/ Team Manager and Co-Team Manager to Sports/ Cultural Activities/ Stock verifying Officer/ Anti-ragging squad member/ grade point conversion work/ worked as

Rapporteur/ Co-Chairman in the National/ International Conferences, Seminars, Workshops/ Symposium etc., Member of Class and Exam time-table committee, Press meet work/ participation in UG&PG admission/ member involved in organization/ selection of farmers / teachers for nomination to various awards.

**Any other activities duly certified by the controlling officer**

**Note: Duplication of claims is not entertained**

Sl. No.	Name of the Activity	Duration/Date
<b>a) Activities listed under (a) above</b>		
<b>b) Activities listed under (b) above</b>		

**VII. Outstation Service (other than A, B Class cities and UASR, HQ)**

Sl. No.	Designation & Office	Place of Work	Duration		City Class (C / Others)
			From	To	

Any other relevant information:

**Date:**

**Signature of the Teacher**

**Place:**