

S.A.P.D. Jain Pathashala's
**HIRACHAND NEMCHAND
COLLEGE OF COMMERCE**

(Autonomous College)

Seth Walchand Hirachand Marg, Ashok Chowk, Solapur – 413 006
Affiliated to Punyashlok Ahilyadevi Holkar Solapur University, Solapur)
B.Com.- Grant Section (Aided)

APPOINTMENTS

Application are invited for the following
CLOCK HOUR BASIS (C.H.B.)
Post for the Academic Year 2026-2027

Sr.No.	Subject	Designation	Total CHB Post
01	Commerce	Assistant Prof.	02
02	Accountancy	Assistant Prof.	02
03	Business Regulatory Framework	Assistant Prof.	01
04	Business Mathematics	Assistant Prof.	01
05	English	Assistant Prof.	01
06	Statistics	Assistant Prof.	01

1. The above posts are open to all.
2. All the above posts are Purely on Temporary Clock Hour Basis for Academic Year 2026-27 only & subject to workload approval of Jt. Director of Education H.E. Solapur Region, Solapur for Senior College Section.
3. Educational Qualification and other requirements are as prescribed by the UGC and Govt. of Maharashtra. Remuneration and workload of the above posts will be as per Govt. Resolution No.- संकीर्ण 2018/(185/18) मशि-३, dated 14th November 2018 and University Circular No. सोविसो/शि.मा./परिपत्रक 4.2018-19/10949 dt. 24th December 2018 and Govt. Resolution No. संकीर्ण 2021/प्र.क्र.181/21/विशि-१ dated 17th October 2022.
5. Applications with full details should reach to the Principal, Hirachand Nemchand College of Commerce, Solapur within 10 days from the date of publication of this Advertisement. Incomplete application will not be entertained.
6. For more details see our website www.hnccsolapur.org

PRINCIPAL

SECRETARY



APPLICATION FORM

**I-Card Size
Photograph**

As per the Advt. in _____ paper Dated. / / I am applying
for the Post of _____ in MBA/ M.Com. / BBA / BCA / B.Com.

• **Name (Beginning with Surname):-** _____

• **Date of Birth:-** / / **Gender:-** _____ **Marital Status:-** _____

• **Religion:-** _____ **Caste:-** _____ **Category:-** _____

• **Permanent Address :-** _____

Mobile No.:- _____ **E-mail ID:-** _____

• **Address for Communication:** _____

Mobile No.:- _____ **E-mail ID:-** _____

• **Academic Qualifications :-**

Sr. No.	Examination Passed	Subject/s	University/ Institute	% of Marks / CGPA	Grade / Class	Year of Passing
01	S.S.C					
02	H.S.C.					
03	UG: _____					
04	PG _____					
05	M.Phil./Ph.D.					
06	SET/NET					
07	Others					

(Attach separate annexure if necessary)

- **Teaching / Industry Experience :-** (Teaching in Years: _____ Industry in Years:- _____)

Sr. No.	Name of the Organization	Designation	Total Experience (in Years)			Reasoning for Leaving
			From	To	Total	
01						
02						
03						
04						
05						

(Attach separate Annexure if necessary)

- **Subjects Taught / Expertise :-** _____

- **Research Publication till the Date :-**

Paper Publication	Scopus	Web of Science	ABDC Listed	UGC Care/ Approved	Peer Reviewed	Total
Conference attended	National in No's: _____		Intentional in No's: _____			
Book/Book Chapter	Book in No's: _____		Book Chapter in No's: _____			
Research Projects	Completed in No's: _____ Total Grant in Rs: _____		Ongoing in No's: _____ Total Grant in Rs: _____			

- **Languages Known :-**

Language	Read	Write	Speak
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hindi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marathi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- **References :-**

- | | |
|-----------------------|-----------------------|
| • Name: _____ | • Name: _____ |
| • Organization: _____ | • Organization: _____ |
| • Designation: _____ | • Designation: _____ |
| • Mobile No.: _____ | • Mobile No.: _____ |
| • E-mail ID: _____ | • E-mail ID: _____ |

- **Declaration :-**

I hereby declare that the information provided above is true and correct to the best of my knowledge and belief

Signature of Candidate

Date:- _____

Place:- _____

Important Note:- Attach attested Xerox copies of all Marklists with this form