



**OFFICE OF THE PRINCIPAL, B.J.B. AUTONOMOUS COLLEGE,
BHUBANESWAR – 751014**

www.bjbcollege.in E-mail: bjbcollege123@gmail.com 0674-2436971

No. 5879 Dt. 16/10/25

NOTICE

**WALK- IN – INTERVIEW FOR EMPANELMENT OF GUEST FACULTY IN THE
DEPARTMENT OF TEACHER EDUCATION (B.Ed.S/F) FOR THE Year 2025-26**

A walk-in interview for Empanelment of Candidates for engagement as **Guest faculty in Curriculum and Pedagogic subject of English** in the department of Teacher Education (B.Ed.S/F) of B.J.B. Autonomous College as and when required in the session 2025-26. The interview will be held in Room No.10 of the **Department of Teacher Education**, New Arts Block, B.J.B. Autonomous College, Bhubaneswar on 27/10/2025 at 10.30 AM to 4.30 PM.

DETAILS OF WALK-IN INTERVIEW FOR EMPANELMENT OF CANDIDATES

Sl. No.	Name of the Post	Subject	Qualification & Eligibility (As per NCTE Norms, B.Ed. 2014)	No. of Posts	Remuneration
1.	Curriculum and Pedagogic Course	English	- PG Degree in Arts (English) with minimum 55 % marks - M.Ed. with minimum 55% marks - NET in Education or concerned subject	01	Consolidated monthly remuneration Rs. 35,000/- (As per DHE Odisha Letter NO.33122/HE dated 24/06/2025)

Note:

- Candidates awarded Ph.D. in Education as per UGC (Minimum Standards & Procedure for Award of Ph.D.) Regulations-2009 are exempted from NET.
- Preference will be given to superannuated faculty members from any Government Teacher Education Institutions (TEIs), not exceeding 75 years of age and possessing the requisite qualifications.

Instructions for Candidates:

- Interested candidates must report at the venue duly filled in **ANNEXURE- II** with relevant documents (Self-attested photocopies of certificates, mark-sheets and experience certificate (if any) and original certificates for verification on the scheduled date and time.
- No TA/DA will be provided for attending the interview.
- The Principal reserves the right to cancel part or the entire walk-in-interview without assigning any reason thereof.

Date & Time of Walk-In-Interview

Date	Time	Curriculum and Pedagogic Course
27/10/2025	10.30 AM to 4.30 PM	Pedagogy of English

Venue: Room No. N-10, Department of Teacher Education (B.Ed.S/F), New Arts Block, B.J.B. Autonomous College, Bhubaneswar

JRath
16/10/25

Principal
B.J.B. Autonomous College
Bhubaneswar

Memo No. 5880 Date. 16/10/25

Copy to all Notice Boards / HoD, Dept. of Teacher Education (B.Ed.)/Administrative Bursar/Academic Bursar/Accounts Bursar/OIC, College Website/ Principal's Guard File/ SO in charge for information. OIC college website is requested to publish this notice in the website.

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16/10/25

JRath
16/10/25

Principal
B.J.B. Autonomous College
Bhubaneswar

ANNEXURE-II**APPLICATION FOR ENGAGEMENT OF GUEST FACULTY ON CONTRACTUAL BASIS IN IASEs / CTEs / GOVERNMENT TEACHER EDUCATION INSTITUTIONS OF THE STATE OF ODISHA FOR THE SESSION _____**

Name of the institution applied to : _____

Post Applied for : _____

1. Name of the Candidate :

2. Father's/Husband's Name :

3. Date of Birth :

4. Marital Status :

5. Category (SC/ST/OBC/UR/PWD) :

6. Nationality :

7. Gender (Male/Female) :

8. Languages known :

9. Permanent Address : _____

10. Present Address : _____

11. Contact No. (Functional) :

12. E-mail ID :

13. Educational Qualification :

(attach self-attested Photocopy of all Certificates and Marksheets)

Examination Passed	Board / University	Year of Passing	Division / Grade	Full Marks	Marks Secured	% of Marks
10th						
+2 (Arts / Science/Commerce)						
+3 (Arts / Science/Commerce)						
MA (Education)						

80

PG (School subject)						
B.Ed						
M.Ed						
M.Phil. in ___subject						
Ph.D (Education/any school subject)						
UGC-NET/JRF						

14. Teaching Experience (IASE / CTE / Government Teacher Training College / Government College/ Government Aided College)

Sl. No.	Name of the Organization/ Institution	Type of organization (Government /Aided/ Private)	Designation	Nature of Work	Period of Service

15. Other Technical / Professional Qualification (if any)

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DECLARATION

I do hereby declare that all the information given above are true to the best of my knowledge and belief.

Place :

Date :

Full Signature of the Applicant



DECLARATION BY VERIFYING OFFICER/ HEAD OF THE INSTITUTION

Details as given in this Application of _____ (name of the candidate)
for the post of _____ are verified and found correct.

Remarks (if any) : _____

Name : _____

Designation: _____

Place : _____

Date : _____

Full Signature and Seal of the Principal