**APPLICATION FORM FOR RECRUITMENT OF NON – FACULTY POSTIONS**

|  |  |  |
| --- | --- | --- |
|  | **ADVERTISEMENT NO AND DATE** |  |

|  |  |
| --- | --- |
|  | **TRANSACTION DETAILS** |
|  |

|  |  |
| --- | --- |
| **TRANSACTION ID** |  |
| **BANK NAME** |  |
| **BRANCH NAME** |  |
| **AMOUNT** |  |

 |

|  |
| --- |
| **PASTE PASSPORT SIZE PHOTO HERE** |

|  |  |  |
| --- | --- | --- |
|  | **POST APPLIED FOR** |  |

|  |  |
| --- | --- |
|  | **PERSONAL DETAILS** |
|  |

|  |  |  |
| --- | --- | --- |
|  | **Name of Applicant** |  |
|  | **Mother’s Name** |  |
|  | **Father's Name** |  |
|  | **Full Address with PIN** |
|  | **Address for Communication**  |  |
|  | **Permanent Address with Police Station and PIN** |  |
|  | **E – Mail Id** |  |
|  | **Mobile No.** |  |
|  | **Gender** | **MALE** | **FEMALE** | **OTHERS** |
|  | **Date of Birth****(*Attach proof*)** | **DAY** | **MONTH** | **YEAR** |
|  |  |  |
|  | **Age as on 31.03.2019** | **Years** | **Months** | **Days** |
|  |  |  |
|  | **Marital Status** | **MARRIED** | **SINGLE** |
|  | **Category** | **SC** | **ST** | **OBC** | **OPEN** |
|  | **Whether belong to PWD** | **YES** | **NO** |
|  | **If YES, please specify**  | **Category of PWD** | **%-age of disability** |
|  |  |  |  |

 |

|  |  |
| --- | --- |
|  | **EDUCATIONAL QUALIFICATION** |
|  | Give the details of “Educational Qualification” in the following format:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Degree** | **Name of Board / University** | **Branch / Specialization** | **Year of Completion** | **Div. / Class** | **%-age of Marks / CGPA / CPI** |
| **X** |  |  |  |  |  |
| **XII** |  |  |  |  |  |
| **DIPLOMA** |  |  |  |  |  |
| **GRADUATION** |  |  |  |  |  |
| **POST-GRADUATION** |  |  |  |  |  |
| **Ph.D.** |  |  |  |  |  |
| **OTHERS** |  |  |  |  |  |
| **Title of Ph.D. Thesis** |  |

 |
|  |  |

|  |  |
| --- | --- |
|  | **EXPERIENCE** |
|  | Give the details of “Experience” in the following format:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S. No** | **Organization** | **Designation** | **Period (Date)** | **Duration** | **Pay Scale** |
| **From** | **To** | **Years** | **Month** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

 |
|  |  |

|  |  |
| --- | --- |
|  | **LIST OF COPIES OF CERTIFICATE ENCLOSED** |
|  |

|  |  |
| --- | --- |
| Sl. No. | Details |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

 |

|  |  |
| --- | --- |
|  | **LIST OF COPIES OF ANNEXURES ENCLOSED** |
|  |

|  |  |  |
| --- | --- | --- |
| Sl. No. | Annexure No. | Details |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

 |

I hereby declare that all the information given above is correct to the best of my knowledge and belief. Also I have carefully checked that the position for which I am applying has been advertised by NIT Silchar. I fully understand that if it is found that any information given in the application is incorrect/false or if I do not satisfy the eligibility criteria at a later date, my candidature/appointment is liable to be cancelled.

Date: Signature of Applicant

**Recommendation / Comments of the present employer with office seal:**

(For employed person of Govt. / Semi Govt. organizations only)

Seal with Date: Signature of Employer