

राष्ट्रीय प्रौद्योगिकी संस्थान,मणिपुर National Institute of Technology, Manipur Langol, Imphal, Manipur – 795 004, An Autonomous Institute under Ministry of Education, Govt. of India

Appl	lication for the po	st of	
Adve	ertisement no.:		
1.	Name of the applicant [IN CAPITAL LETTERS]		
			Affix self attested passport size photograph
2.	Mother's name		
3.	Father's name		
4.	Address with PIN for		
	Communicatio n		
5.	Permanent Address with PIN and Police Station		

6.	Email ID:										
7.	Mobile Number:		•••••			• • • • • • •		• • • • •		••••	
8.	Gender:					•••••		• • • • •			
9.	Date of Birth(Attac Proof):	eh									
10	Marital Sta	itus:									
11	Category:		•••••	• • • • • • • • • • • • • • • • • • • •	•••••	• • • • • • • •		• • • • •		••••	•••
12	Whether belongs to PWD:										
13.Ec	lucational qu	ualifica	tion (A	Attach ce	rtificates & ma	ırk she	ets)				
Degr	ree	Name /Univ	e of ersity	Board	Branch Specialization) On	Year Completion	of	Div. Class	/	%-age of Marks / CGPA / CPI
	ree			Board				of		/	of Marks / CGPA
Degr	ree			Board				of		/	of Marks / CGPA
Degr X	ree			Board				of		/	of Marks / CGPA
Degr X XII	ree			Board				of		/	of Marks / CGPA
Degr X XII UG PG	of M.Tech	/Univ	ersity	Board				of		/	of Marks / CGPA

14.Experience

Sl. No	Organization	Designation	Period(Date)		Duration		Pay Scale		
			From To		Years	Month			

^{*}Experience with respect to project funded by any government agency enclosed the copy of the appointment letter.

15	15. DETAILS OF JOURNAL PAPERS IN SCI/SCOPUS											
Sl.	List of Authors	Title of the paper	Name of	Public	Role	of	Cr					
No.			the	ation	Applicant ed							
			Journal	details	1 st	Co-	t					
				(Vol.,	Author/	Aut	Poi					
				Year,	Main	hor	nts					
				pp.,	Supervi							
				DOI)	sor							
At	tach the first page of ea	ach journal paper										

S1. No.	List of Authors	INTERNATIONALL Title of the paper	Name of the Conference & Organizer	Publication details (Place,	Role Applica 1st Autho r/Mai n Super visor	of Co-Auth or	Cr edi t Po int s
17.	tach the first page of e LIST OF COPIES OI .No. Details	ach journal paper F CERTIFICATES E	ENCLOSED				

I hereby declare that all the information given is correct to the best of my knowledge and belief. 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.

Signature of Applicant

Date: