



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

**Application for the post of MeitY Grant number 11(1)/2022-HCC(TDIL)-Project Assistant Engineer in CSE Dept., NIT Manipur**

Advertisement 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 Communication .....

5. Permanent Address with PIN and Police Station .....

6. Email ID: .....
7. Mobile Number: .....
8. Gender: .....
9. Date of Birth(Attach Proof): .....
- 10 Marital Status: .....
- 11 Category: .....
- 12 Whether belongs to PWD: .....

13.Educational qualification (Attach certificates & mark sheets)

<b>Degree</b>	<b>Name of Board /University</b>	<b>Branch Specialization</b> /	<b>Year of Completion</b>	<b>Div. / Class</b>	<b>%-age of Marks / CGPA / CPI</b>
<b>X</b>					
<b>XII</b>					
<b>UG</b>					
<b>PG</b>					
<b>Title of M.Tech Thesis:</b>					
<b>Title of B.Tech Thesis:</b>					

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.

<b>15. DETAILS OF JOURNAL PAPERS IN SCI/SCOPUS</b>							
Sl. No.	List of Authors	Title of the paper	Name of the Journal	Publication details (Vol., Year, pp., DOI)	Role of Applicant		Credit Points
					1 <sup>st</sup> Author/Main Supervisor	Co-Author	

Attach the first page of each journal paper

**16. DETAILS OF CONFERENCE PAPERS INDEXED IN SCI /SCOPUS /WEB OF SCIENCE CONFERENCE /ANY INTERNATIONALLY RENOWNED CONFERENCE**

Sl. No.	List of Authors	Title of the paper	Name of the Conference & Organizer	Publication details (Place, Year, pp., ISSN)	Role of Applicant		Credit Points
					1 <sup>st</sup> Author/Mail Supervisor	Co-Author	

Attach the first page of each journal paper

**17.LIST OF COPIES OF CERTIFICATES ENCLOSED**

Sl.No.	Details

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.

Date:

Signature of Applicant