

**NATIONAL INSTITUTE OF TECHNOLOGY, MANIPUR
TECHNICAL EDUCATION QUALIFY IMPROVEMENT PROGRAM - III**

APPLICATION FORM

APPLICATION FOR THE POST OF _____

1. Name in Full: _____ **Gender: M / F**
(In Block Letters)

2. a) Father's Name: _____

b) Mother's Name: _____

3. i) Address for correspondence:

Phone No. _____ Fax No. _____

Mobile No. _____

E-mail address: _____

ii) Permanent Address: _____

4. Nationality: _____

Date of Birth : dd/mm/yy Age: Years Months

5. Category: SC ST OBC UR PWD

In case of OBC, whether belong to Non creamy layer ... **Yes / No**

6. Particulars of Educational Qualifications

Sl. No.	Degree Obtained & Branch / Specialization (specify)	Name of the University/Institute	Year of Passing	% of Marks/ CGPA	Class/ Division
1	HSC				
2	Higher Secondary				
3	Graduation				
4	Post-Graduation				
5	Other				

* **Attach separate sheet if required**

Affix self-attested recent colored passport photo

7. Particulars of Technical/ Professional Qualifications (Mark sheets should be enclosed):

Sl. No.	Examination Passed	Name of the Board/ University/Institute	Year of Passing	% of Marks/ CGPA	Class/ Division
1					
2					
3					

8. Experience and details of employment, if any (Certificate should be enclosed):

Sl. No.	Name of Organization	Name of Post	Period	Nature of Work Handled

9. Professional Qualifications: (a) Typing Speed (in computer) _____ wpm

(b) Proficiency in working MS Word, Excel, Power point: Very Good/ Good/ Average (strike off whichever is not applicable)

10. DETAILS OF TESTIMONIALS / CERTIFICATES / DOCUMENTS ENCLOSED:

N.B.: Every application must be accompanied by self-attested photo copies of documents in support of claims made by the candidate in respect of date of birth, academic qualifications, practical training, experience, caste etc.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

**Name & Signature of the Candidate:
Date:**

DECLARATION BY THE APPLICANT

I, the undersigned, hereby declare that I have carefully read and understood the instructions and particulars provided by the Institute and affirm that all information that I have furnished is true to the best of my knowledge and belief.

I understand that I alone will be responsible for any consequences arising out of incorrect and / or incomplete information furnished in this application.

Place: _____

Signature of applicant : _____

Date: _____

Name: _____

FOR OFFICE USE ONLY

1. Application received on: _____

2. Remarks _____

3. Selected for the Interview: **YES / NO**

4. Contact details of Candidate: (a) E-mail: _____

(b) Mobile No: _____