APPLICATION FORM (To be filled in by the office)

Affix Recent

			Passport
Application No.	:		- Photograph
No. & Date of receipt	:		_
Post applied for	:		_
Department	:		_
Specialization	:		_
Signature of Receiving Officer	:		_
Transaction ID	Bank Name	Branch Name	Amount (₹)
	(To be filled in by c		
* Before filling of the ap	oplication forms candida	ates should properly go thro	ough the

instructions/terms and conditions

1.	a) Advertisement No.	:
	b) Post applied for	:
	c) Department	:
	d) Specialization	:
2.	Full name of the candidate (in block letters)	:
3.	Date of Birth (in Christian era)	:
4.	Father's Name	:
	Mother's Name	
5.	Nationality	:

6.	Religion		
7.	Present Postal Address	:	
	(in block letters)		
8.	Permanent Address	:	
	(in block letters)		
9.	Tel. No: Landline	:	(0)
	(with STD code) Mobile No.		(R)
4.0			
10.	Email ID	:	
11.	Whether belongs to SC/ST/OBC/PH	:	
	SC/S1/OBC/FH		
12.	Marital Status	:	
13.	Languages known	:	
	(Read, Write & Speak)		

14. Education qualifications (Starting with the highest degree)

Degree awarded/ Examination passed	University/Board	Year of passing	Percentage of marks obtained/ CGPA	Subject/ Specialization
Post Graduation			00111	
Graduation				
Senior Secondary				
(Plus Two)				
High School				
Others				

15. Technical / Professional Qualification (if any):

Name of Exam Passed	University / other Exam Body	Year	Subjects	Marks Obtained	Div. with % of marks
2	Brain Booy				11441115

16.	Scholarsh	ip & Fellowship Won	with Details	(if any):		
17.		ion of authority held or extra-curricular activit		(other than scholarsh	nips) gained at school	l colleges

18. Work Experience: (Starting from Present Organization)

Sl. No.	Name of Employer	Designation	From	То	Salary Details	Brief description of duties	Reasons for leaving

19	19. Training/Project undertaken (if any):					
20.	<u> </u>					
	(i)]	Present Scale of Pay		(ii) Basi	e Pay	
		, <u></u>		- ()	<u> </u>	
	(iii)) Date of Next Increment		_ (iv) Gro	ss Pay	
	(v)	Basic Pay acceptable		_		
2	1.	Period required for joining the pos	st, if selected:			
22	2					
2,	2.	Any other relevant information yo	may like to	Turnisn: (Att	ech separate sheet	:S)
23.	Outr	each activity if any:				
24.	Refe	rences: (Responsible persons, not re				
24.	Refe					
24.	Refe	rences: (Responsible persons, not re				
24. Sl. No.	Refe	rences: (Responsible persons, not reprofessional work)	Phone:		closely acquainted	
24.	Refe	rences: (Responsible persons, not reprofessional work)	elated to the a		closely acquainted	
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24. Sl. No.	Refe	rences: (Responsible persons, not reprofessional work)	Phone: E-mail: Fax: Phone: E-mail:		closely acquainted	
24. Sl. No. 1) 2)	Refe	rences: (Responsible persons, not reprofessional work)	Phone: E-mail: Fax: Phone: E-mail: Fax: Phone: Fax: Phone:		closely acquainted	
24. Sl. No. 1)	Refe	rences: (Responsible persons, not reprofessional work)	Phone: E-mail: Fax: Phone: E-mail: Fax: Phone: E-mail: Fax:		closely acquainted	
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24. Sl. No. 1) 2) 25. Li 1) 2) 3) 4)	Refeand p	rences: (Responsible persons, not reprofessional work) Name and Designation	Phone: E-mail: Fax: Phone: E-mail: Fax: Phone: E-mail: Fax:	7) 3) 9) 10)	closely acquainted	
24. Sl. No. 1) 2) 3) 25. Li 1) 2) 3)	Refeand p	rences: (Responsible persons, not reprofessional work) Name and Designation	Phone: E-mail: Fax: Phone: E-mail: Fax: Phone: E-mail: Fax:	7) 3)	closely acquainted	

Declaration:

I hereby declare that the information furnished above is true to the best of my knowledge and belief. I understand, if at any time, it is found that I have concealed any information or have given any incorrect data, my candidature/appointment may be cancelled/terminated without any notice or compensation.

Place	
	(Signature of the Candidate)
Date	

FORWARDED

(To be filled in by the present employer)

Place:	Signature of the Forwarding Authority:
Date:	Designation:
	Office Seal:

N.B.: Every application must be accompanied by Attested Xerox copies of documents in support of claims made by the candidate in respect of his date of birth, academic qualifications, practical training, experience, caste, etc. A list of copies of certificates etc., attached to this application is to be given.

INSTRUCTIONS

- 1) Copies of all certificates/testimonials should be attached and originals will have to be shown at the time of Interview.
- 2) Persons in employment should send their applications through proper channel. However, they may send a copy in advance, but it must be on the prescribed form & accompanied by the required receipt of processing fee, copies of certificates/testimonials etc.
- 3) Applications received after the due date or found incomplete may not be considered.
- 4) Application must be sent in the prescribed format through speed post/registered post to The Director, National Institute of Technology Manipur, Langol, Imphal- 795004. The application with all its enclosure securely fastened to it should be superscribed "Application for the post of Registrar" on top of the envelope. Last date of submission of application is 15.02.2019 upto 4:00 P.M. Application should be submitted on a signed hard copy only. Applications via email will not be entertained.

CHECKLIST:

- a) Marks/Grades cards at all levels starting from SSLC
- b) SSLC & PUC certificates
- c) Degree Certificates
- d) Experience certificate (If any)
- e) SC/ST/OBC/PH certificate
- f) Print out the receipt of payment and attach with the Application form.
- g) Two copies of recent passport size photograph
- h) Transaction slip for the application fee.