Application Form for JRF Position

(Advt. No. IIITK/Rectt/SRIC-JRF/24-25/65, Dt. 03/12/2024)

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| 1.(a) Name: Mr./Ms./Mrs.....................................…………………………  (b) Parent/Spouse/Guardian ..........................................................  (c) Addresses:  i) For correspondence ii) Permanent  ............................................... ...................................................  ............................................... ...................................................  ............................................... …................................................  ............................................... ...................................................  (d) Email:  (e) Mobile: | Paste color photo  here |
| 2. (a) Date of Birth (dd/mm/yyyy):………...................... (b) Nationality:……......................  (c) Married / Single: ………….…………… | |

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| 3. Details of Universities/Institutions attended (from Class 10 onwards)  (attested copies of certificates and mark sheets/grade cards must be attached); | | | | | | |
| **Class/**  **Degree obtained**  **(with discipline)** | **School/College** | **University/**  **Board** | **Year**  **of passing** | **% Marks/**  **CGPA/ CPI** | **Class Obtained** | **Dept./Stream/Subjects** |
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| 4. Professional qualifying examination passed (Attested copy of certificate must be enclosed.  Also, fill-in the required information by going through the prescribed eligibility criteria):  (1) GATE (2) UGC/CSIR NET/INSPIRE/Others | | | | | | | | | | |
|  | Subject | GATE  Score | GATE Marks | All India Rank | Valid up to |  | Subject | Year of Qualifying | Valid up to |  |
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| 5. Projects (Use separate sheet to provide details if required):  a) B.TECH/ MCA/M.Sc., Project Title:  b) M. Tech. Project Title (With name of the guide):  c)Title of other Projects that have been completed with the project name, duration and sponsoring agency, if any | | | | | | | | | | |
| 6. Professional Experience (Teaching/ Research/ Industrial) if any (proof to be attached).     |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Name of organization | Position held | Period | | Grade Pay  (if applicable) | Remarks | | From | To | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | | | | | | | | | | | |
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| 1. List of publications, if any: | | | | | | | | | | |
| 1. List of two references (Address, email and telephone number). | | | | | | | | | | |
| 1. Why do you feel yourself suitable for this project? | | | | | | | | | | |
| 1. List of Enclosures : | | | | | | | | | | |
| 1. Any other information: | | | | | | | | | | |

**Declaration**

I hereby declare that the entries made in this application form are correct to the best of my knowledge and belief. If selected for admission, I promise to abide by the rules and regulations of the Institute.

I note that the decision of the Institute is final and binding in regard to selection for admission. The Institute shall have the right to take any action it deems fit, including expulsion, against me at any time after my admission, if it is found that any information furnished by me is incorrect.

Place:

Date: Signature of the applicant

**Note:** Send in duly filled file of the form by email as specified by **25th December, 2024**. Bring the hardcopy along with copies of all supporting documents for walk in interview on **27th December 2024.**