



# INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, KALYANI

*An Institute of National Importance*

(Autonomous Institution under MOE, Govt. of India &  
Department of Information Technology & Electronics, Govt. of West Bengal)  
WEBEL IT Park,14, Adivasi Para, Opposite of Kalyani Water Treatment Plant  
Near Buddha Park, Dist. Nadia, P.O. Kalyani - 741235, West Bengal.

Application for the post of \_\_\_\_\_

Photo

1	Name of the candidate		
2	Father`s /husband`s name		
3	Date of birth		
4	Gender		
5	Nationality		
6	Category-SC/ST/OBC/GENERAL		
7	Email ID		
8	Telephone No.		
9	Address for Communication		
10	Permanent Address		
11	Periods of Experience	.....years and ..... months	
12	Higher Qualification		
13	Present post		
14	Pay band and grade pay of the present post		
15	Date from which working in the above post		
16	Have you ever been convicted by Court of Law or is there any criminal case/disciplinary action/vigilance enquiry pending against you? If yes, please specify		

17. Details of educational/professional qualification (beginning with the Highest Degree) :

S. No.	Qualification	Year of Passing	Board/University	Division



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18. Details of experience/Employment (beginning with the most recent) (Please attach a separate sheet if required)

S. No	Name of the organization	Position held	Date of joining	Date of leaving	Pay band along with grade pay	Nature of work done

19. Name & Address of two references

Name	Address	Designation	Contact no. with e-mail address

20. Training/ Certifications Undergone:

21. Any other Award /Honour/Degree/etc. not mentioned above:

Declaration:

I, .....hereby declare that all the details submitted above are true to the best of my knowledge and belief.

Date:

Place:

\_\_\_\_\_  
**Signature of the Applicant**

**Endorsement of the present Employer:**

The application of Shri/Ms. .... (Name and designation of the applicant) for the post of..... at IIIT- Kalyani is forwarded herewith. It is certified that no vigilance enquiry is pending or contemplated against him/her.

Date:

\_\_\_\_\_  
**Signature of the head of the institution/  
Forwarding authority with seal**