

## INDIAN INSTITUTE OF INFORMATION TECHNOLOGY

(Autonomous institution under MHRD, Govt. Of India & Department of Information Technology & Electronics, Govt. of West Bengal)
WEBEL IT Park, 14, Adibasi Para, Opp. Kalyani Water Treatment Plant
Near Buddha Park, Kalyani, Nadia, PIN: 741235, West Bengal
Tel: (033) 2582 2240 web site: www.iitkalyani.edu.in

|                                                                                             | Application form for the post of                            |                       |                 |                  |          |  |
|---------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------|-----------------|------------------|----------|--|
|                                                                                             |                                                             |                       |                 |                  |          |  |
|                                                                                             |                                                             |                       |                 |                  |          |  |
|                                                                                             | Advertisement No.                                           |                       | Date            | ed:              |          |  |
| 1                                                                                           | Name of the candidate                                       |                       |                 |                  |          |  |
| 2                                                                                           | Father`s /husband`s name                                    |                       |                 |                  |          |  |
| 3                                                                                           | Date of birth                                               |                       |                 |                  |          |  |
| 4                                                                                           | Gender                                                      |                       |                 |                  |          |  |
| 5                                                                                           | Nationality                                                 |                       |                 |                  |          |  |
| 6                                                                                           | Category-UR/SC/ST/OBC/PWD                                   |                       |                 |                  |          |  |
| 7                                                                                           | Email ID                                                    |                       |                 |                  |          |  |
| 8                                                                                           | Telephone No.                                               |                       |                 |                  |          |  |
| 9                                                                                           | Address for Correspondence                                  |                       |                 |                  |          |  |
| 10                                                                                          | Permanent Address                                           |                       |                 |                  |          |  |
| 11                                                                                          | Periods of Experience                                       |                       | years andmonths |                  |          |  |
| 12                                                                                          | Higher Qualification                                        |                       |                 |                  |          |  |
| 13                                                                                          | Present post                                                |                       |                 |                  |          |  |
| 14                                                                                          | Pay-Scale/Pay in Pay-Band and Grade Pay of the present post |                       |                 |                  |          |  |
| 15                                                                                          | Date from which working in the                              | above                 |                 |                  |          |  |
|                                                                                             | post                                                        |                       |                 |                  |          |  |
| 16                                                                                          | Have you ever been convicted                                | •                     |                 |                  |          |  |
|                                                                                             | of Law or is there any case/disciplinary action/vigilance   | criminal              |                 |                  |          |  |
|                                                                                             | pending against you? If yes                                 |                       |                 |                  |          |  |
|                                                                                             | specify                                                     | , 1                   |                 |                  |          |  |
| 17. Details of educational/professional qualification (beginning with the Highest Degree) : |                                                             |                       |                 |                  |          |  |
| Sl.N                                                                                        | o. Qualification                                            | Alification Year of I |                 | Board/University | Division |  |
|                                                                                             |                                                             |                       |                 |                  |          |  |
|                                                                                             |                                                             |                       |                 |                  |          |  |
|                                                                                             |                                                             |                       |                 |                  |          |  |
|                                                                                             |                                                             |                       |                 |                  |          |  |

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

| Sl.No | Name of the organization | Position<br>held | Date of joining | Date of leaving | Pay-scale<br>/Pay in<br>Pay-Band<br>along with<br>grade pay | Nature of work done |
|-------|--------------------------|------------------|-----------------|-----------------|-------------------------------------------------------------|---------------------|
|       |                          |                  |                 |                 |                                                             |                     |
|       |                          |                  |                 |                 |                                                             |                     |
|       |                          |                  |                 |                 |                                                             |                     |
|       |                          |                  |                 |                 |                                                             |                     |

## 19. Name & Address of two references

| Name | Address | Designation | Contact no. with e-mail address |
|------|---------|-------------|---------------------------------|
|      |         |             |                                 |
|      |         |             |                                 |

| 20. Training Undergon | e:                         |                 |                            |
|-----------------------|----------------------------|-----------------|----------------------------|
| 21. Any other Award   | Honour/Degree/etc. not m   | entioned above: |                            |
| Declaration:          |                            |                 |                            |
|                       | ue to the best of my knowl |                 | clare that all the details |
| Date:                 |                            |                 |                            |
| Place:                |                            | Signa           | ture of the Applicant      |
| 22. Endorsement of th | e present Employer:        |                 |                            |

Date: Signature of the head of the institution/Forwarding authority with seal