

(Autonomous institution under MHRD, Govt. of India & Department of Information Technology & Electronics, Govt. of West Bengal) c/o WEBEL IT Park, Opposite of Kalyani Water Treatment Plant, Near Buddha Park, Dist. Nadia, Kalyani - 741235, West Bengal Email-office@iiitkalyani.ac.in, website-www.iitkalyani.ac.in

(Application Form for Faculty Position) Advertisement No. Dated:											ottested ograph			
Post Applied for							DD Number /							
Department					Amount & Date									
Specialization					Na	ame o	of issuii	ng bank						
1.	Name in Full (in capital letters)													
2.	Date of Birt	h												
	Age as on 2	Age as on 29.10.2021					Year		M	onth			Day	
3.	a) Marital S	tatus				b) G	ende	r						
4.	a) Permanent address				b) Co	orres	ponden	ce Add	ress					
	Phone No.					E-ma	ail							
5.	Nationality													
6.	6. Category					SC /	ST/	OBC /	PWD /	EWS	G / GEN	1		
7. Details of Educational Qualification (from Exam. Passed Specialization Board/			(from Ma rd/Unive		ation	onward	ds):	ng	Class	S	% n	narks		
* For Ph.D. Degree mention the duration/period						l.							ļ .	
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8. Details of employments: (a) Teaching: Total									Post Ph	D				
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1. Book S. No.	xs/Monographs/Book chap Name of book/monograph Book chapters				Name of Co- Author, if ar			Year of Publication		ı	Publisher with Address	
2. Sem i Sl No.	inars/Short Term Courses/ From To Nar cou			ne of the		Sponsored Financed				nized: Number of Participants		
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5. Mem S. No.	. Membership of Professional Bodies: S. No. Name of Professional Gr				ade of			Membership no. with va			th validity	
6. Adm	inistrative	/ Institute	Suppo	ort work	κ:							
S. No.	Section/office/Institute Level committee			From	om To		Position held			Responsibilities		
_	other relev				Separate	shee	t if rec	quire)				
8. Nam	e and add		Refer	ences:	•							
	1st Referee					2nd Referee						
Name						Name						
Position						Position						
Address						Address						
E-Mail	E-Mail					E-Ma	ail					

Phone No.



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..... 19. Did you previously apply for any post in this Institute? If yes, give particulars: **DECLARATION** "I hereby declare that the statements made by me in / above form are true, complete and correct to best of my knowledge and belief." Place:.... Signature of Applicant Date:.... Name..... NO OBJECTION CERTIFICATE TO BE FURNISHED BY THE CANDIDATE WHO IS ALREADY IN EMPLOYMENT, REGULAR/TEMPORARY BASIS. Certified that Mr/Ms.----Son/Daughter of Shri----------is a permanent/temporary/adhoc employee of the institution /organization since -----. The Institution/organization has no objection if he/she is appointed in IIIT Kalyani against the posts advertised by the IIIT Kalyani vide advertisement No...... Place:-----Date:----

Signature & Seal of forwarding Authority



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Self attested recent photo

DATA SHEET

(To be filled by the candidate)

	<u> </u>	(10 00 11	ned by the candio	uale)						
1.	Name and Address									
2.	Age/Date of Birth									
3.	Category: (SC/ST/OBC/E		PWD: Yes/ No							
	Educational Qualification									
	Degree	Specialization	University	% of Marks	Class	Year				
	Matriculation									
4.	Higher Secondary									
١.	UG									
	PG									
	Ph.D.*									
	Others									
5.	Post Doctoral Specializati	ion, if any		1						
6.	Present Position, with sala									
7.	Total Experience: Year	ř	Post Ph.D.							
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	Teaching Experience									
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	Research Experience									
	Industrial Experience									
8.	Publication details (give r	numbers)	International	National						
	Journal Papers:									
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			II.C	P.C.						
	No. of Thesis Guided:		UG:	PG:						
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9.	No. of Books and/or Chap	oters								
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10.	Patents									
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11.	Research projects/Consul	tonov								
11.	Research projects/Consur	tancy								
12.	Awards/ Distinctions, if a	nv-								
13.	Total credit points (as d		t noint sheet)							
14.	Any other relevant inform		pomi sneci)							
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Date				Sign	ature of t	the Applicant				
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^{*}Mention the duration /period of PhD.