

NATIONAL INSTITUTE OF TECHNOLOGY MEGHALAYA
(An Institute of National Importance)

APPLICATION FORM

Advt. No.....Dated.....

Post Applied for:.....

Name in Full(Capital Letters).....

Category: Gen/OBC/SC/ST/PWD/Other.....

Self Attested
Photograph

GENERAL CONDITIONS / INSTRUCTIONS

1. Only Indian nationals need to apply.
2. Age Limit shall be as per Govt. of India Norms. The date for calculating the same will be the last date of receipt of the applications as declared in the advertisement / Institute Website. Relaxation of age for candidates under the Reserved Categories shall be as per Govt. of India norms.
3. Mere fulfillment of minimum qualification and experience do not entitle a candidate to be called for the examination / interview.
4. Candidates must have the requisite educational qualifications and experience on the last date of receipt of the applications as declared in the advertisement / Institute Website.
5. No correspondence whatsoever will be entertained from candidates regarding delay, conduct and result of interview and reasons for not being called for the interview.
6. Persons in Govt./ Semi- Govt. employment should submit their applications through proper channel with a forwarding note of the employer OR produce a NOC at the time of interview. If a candidate fails to produce NOC will not be allowed to appear in interview. However, a photocopy of the duly filled in application form may be sent as "Advance Copy" in order to avoid delay in receipt.
7. **Incomplete applications, applications not in the prescribed format will be summarily rejected.**
8. **Attach self-attested scanned copy of all documents.**
9. Canvassing in any form will be a disqualification.
10. Any change of address for correspondence should be communicated giving reference of the Advertisement and post(s) applied for.
11. Applicants are advised to give phone numbers and e-mail address in their own interest to facilitate prompt communication.
12. Applicants may attach additional sheet(s), wherever necessary, mentioning the serial number.
13. The Institute reserves the right to fill in or otherwise, any or all the advertised posts.

1. (a) Advertisement No:..... Dated

(b) Post applied for:

2. Full name of the candidate (in block letters):

3. Date of Birth:

4. Marital Status: *Married/ Single*

5. Father's Name: Mother's Name:

6. Nationality:

7. Present Postal Address (in block letters):

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.....

8. Telephone No./ E-mail:

Landline:

Mobile:

E-mail Id:

9. Permanent Address(in block letters):

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.....
.....

10. Telephone No.

Landline:

Mobile:

E-mail Id:

11. Language Proficiency:a. Read:

b. Write:

c. Speak:

12. Educational qualifications:

| Degree/ Certificate Awarded | Institute/ Board/ University | Date of Completion | Percentage of Marks/ Grade | Discipline/ Trade | Remarks |
|---|-------------------------------------|---------------------------|-----------------------------------|--------------------------|----------------|
| HSLC (X) | | | | | |
| HS (XII) | | | | | |
| ITI Certificate | | | | | |
| Diploma (Pl. specify) | | | | | |
| Degree (Pl. specify) | | | | | |
| Post Graduation / Masters (Pl. specify) | | | | | |
| Any Other (Pl. specify) | | | | | |
| Any Other (Pl. specify) | | | | | |

13. Employment Record (Most recent first):

| Sl. No. | Name of Employer | Designation of Post | Duties Performed | Period | Salary Details | Remarks |
|----------------|-------------------------|----------------------------|-------------------------|---------------|-----------------------|----------------|
| | | | | | | |
| | | | | | | |
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14. Any Training Received:

| Sl. No. | Training Received | Duration | Training Institute/ Organization | Remarks |
|----------------|--------------------------|-----------------|---|----------------|
| | | | | |
| | | | | |
| | | | | |

15. Particular expertise on Programming:

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16. List of Publication

| Sr. No. | Author (s) | Title of paper | Journal/Conference Name with Year |
|---------|------------|----------------|-----------------------------------|
| | | | |
| | | | |
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17. Have you any near relation among the staff of this Institute? If so, state:

| Name of the person | Designation | Relationship with the candidate |
|--------------------|-------------|---------------------------------|
| | | |
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| | | |

18. Any Other Relevant Information:

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19. Declaration:

I hereby certify that the information furnished above are correct and complete. I am aware that if any information provided here is found to be incorrect my candidature/ selection is liable to be cancelled.

Place.....

Date.....

(Signature of Candidate)