**National Institute of Technology, Meghalaya**

**(An Institute of National Importance under MHRD, Govt. of India)**

**Bijni Complex, Shillong 793003, Meghalaya**

**APPLICATION FORM**

Affix latest colour

Passport size

Photograph here (self attested)

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| --- |
| **For Office use** |
| **Application No:**  |  |

1. **Name of the Applicant** Mr./Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (In block CAPITAL letters)

2. **Father’s/Mother’s Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. **Gender:** \_\_\_\_\_\_\_\_\_\_\_ 4. **Date of Birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. **Marital Status:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. **Spouse’s Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. **Category**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. **Present Mailing Address**

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Pin code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. **Permanent Address**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Pin code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Score/percentile details of UGC/CSIR NET/GATE/Other examinations**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Test Name** | **Registration Number** | **Score** | **Rank** | **Qualifying Year/Month** |
| Percentage | Percentile |  |  |
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1. **Details of academic record starting from SECONDARY (Class X) Examination:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Degree/ Exam (with discipline)** | **University / College / Board** | **Year of Passing** | **Percentage of Marks / CGPA** | **Class/Grade/Rank** | **Subjects Taken** |
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1. **Any other fellowship/scholarship/qualifications obtained other than covered in the form? If yes, please mention the details.**

a) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Research/Industrial experience in form of summer trainee, project (please provide details):**

 **a) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **c) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Any other detail you want to provide to assess your candidature please provide the same.**
2. **Details of two referees under whom the candidate has worked or studied**

**Referee 1**

Name:

Designation:

University/Institute:

E-mail id:

**Referee 2**

Name:

Designation:

University/Institute:

E-mail id:

**DECLARATION BY THE APPLICANT**

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.

 **Date:**

 **Signature of the Applicant**

 **Place:**

**FOR OFFICE USE**

From the copies of certificates in support of the above particulars, it is certified that the applicant is **eligible/not-eligible\*** for further consideration by the Screening Committee.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature of the officer in charge of Admission**

***\**particulars…………………………………………………………………………………………………………………………………………………………………………………………………………………………….**