NATIONAL INSTITUTE OF TECHNOLOGY, MIZORAM

Chaltlang Dawrkawn, Aizawl, Mizoram – 796012 (Advt No. NIT-MZ/R/F-NF/01/2015)

APPLICATION PROFORMA FOR THE POST OF NON-TEACHING POSITION

(Ca	ndidates are advised to read g	eneral instructions and information	, before mini	g up me App	meanon ic
APPL	ICATION FOR THE POST O	F			
DD. N	No. & Date:	Bank: Amou	ınt:	Affix self	attested
1. Na	me in Full:	Gen	der: M / F	recent co	
(In	Block Letters)			passpor	t photo
2. a) I	Father's Name:				
b) l	Mother's Name:				
3. i)	Address for correspondence	e:			
	Phone No	Fax No	_ _		
	Mobile No		_		
ii)					
	_				
Oate (In case of OBC	dd/mm/yy Age: DBC UR PWD , whether belong to Non creamy	•	Yes / No	onths
		Qualifications (Attach separate s		· ·	GI /
Sl. No.	Degree Obtained & Branch / Specialization	Name of the Board/University&Institute	Year of Passing	% of Marks/	Class/ Division
10.	(specify)	Board/Oniversity & Institute	i assing	CGPA	וסופואות
1	HSC				
2	Higher Secondary				
3	Rachelor's Degree				

Master's Degree

Others (if any)

4

6

7. Particulars of Technical/ Professional Qualifications (Mark sheets should be enclosed):

Sl.	Examination Passed	Name of the Board/	Year of	% of	Class/
No.		University/Institute	Passing	Marks/ CGPA	Division
1				CGPA	
2					
3					

1	8.	Experience and	l details of	employn	nent, if any	y (Certificate should	l be enclosed)	:

Sl. No.	Name of Organization	Name of Post	Period	Nature of Work

9. An	v other	' inforr	nation	relevant	to the	Post	applied	l for:
	,							

10.	DETAILS	OF TESTIMONIALS /	CERTIFICATES	/ DOCUMENTS EN	JCL OSED.
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N.B.: Every application must be accompanied by self attested photo copies of documents in support of claims made by the candidate in respect of date of birth, academic qualifications, training, experience, caste etc.

(Do attach self attested copies of all documents/ certificates in support of the information furnished by you.)

1	2.
3.	4.
5	
7	
9.	

Date: Name & Signature of the Candidate

DECLARATION BY THE APPLICANT

I, the undersigned, hereby declare that I have carefully read and understood the instructions and particulars provided by the Institute and affirm that all information that I have furnished is true to the best of my knowledge and belief.

I understand that I alone will be responsible for any consequences arising out of incorrect and / or incomplete information furnished in this application.

Place :	Signature of applicant :			
Date :				
(Only for applicants who are in ser	MENT BY FORWARDING AUTHORITY vice of Govt./semi Govt./PSUs/Universities/ Academic Institutions) be filled in by the present employer)			
Forwarded the application of Mr./	Ms./ Dr			
Place: Date:	Signature of the Forwarding Authority: Designation:			
	Office Seal:			
	FOR OFFICE USE ONLY			
1. Application received on:				
2. Remarks				
3. Selected for the Interview: YES	/ NO			
4. Contact details of Candidate:	(a) e-mail:			
	(b) Mobile No:			

Signature of the candidate

NATIONAL INSTITUTE OF TECHNOLOGY MIZORAM

Summary Sheet for Non-Teaching Post

(To be filled by the candidate)

1.	Name of the Can	didate :			
2.	Contact Details	: Mob:			
		Email:			
3.	Post Applied For	:			
4.	Educational Quali	ifications:			
Sl	Certificate/	Name of the	Year of	% of Marks/	For
No	Degree	Institute / University	Passing	Grade/Div.	Office use
1.	HSC				
	Higher Secondary				_
	Diploma				
	Bachlor's degree				
	Master's degree				
	Any Other				
2.	Experience (in years / M	Ionths)			
	Post Held	Organization	Exp. In Yrs/Mn	Salary Drawn	
					1
3.					
	Any other relevant				
	Qualifications / Experien	nce			
	1				ľ

Date: