## FORM OF APPLICATION FOR THE POST OF

| T  | o be returned:<br>o<br>he PI)                            |          |  |                    |                   | Photograph |  |  |
|----|--|----------|--|--------------------|-------------------|------------|--|--|
| 1. | Name in full (in capital<br>letters) (Underline Surname) |          |  |                    |                   |            |  |  |
| 2  | Father's / Husband's Name                                |          |  |                    |                   |            |  |  |
| 3. | a. Marital Status  |          |  | b. Male / Female : |                   |            |  |  |
| 4. | a. Permanent address                                     |          |  | * b. Address f     | or correspondence |            |  |  |
| 5. | Phone No. (including STD code)                           |          |  | E-mail ID          |                   |            |  |  |
| 6. | Date of birth (please attach tru<br>of certificate )     | e copy   |  |                    |                   |            |  |  |
| 7. | Are you a citizen of India by bi domicile?               | th or by |  |                    |                   |            |  |  |

<sup>\*</sup> Any change in address should at once be communicated to the Asst. Registrar (R&D.), IIT Guwahati, Guwahati - 781 039, Assam.

| 11. Details | s of educational qualifications: | Please give particulars of a | I examinations passed ar | nd degrees obtained | commencing with the High | School Leaving (10 | Oth standard / I | Matriculation) |
|-------------|----------------------------------|------------------------------|--------------------------|---------------------|--------------------------|--------------------|------------------|----------------|
| Fxam        |                                  |                              |                          |                     |                          |                    |                  |                |

| Sl. | School / College / Institute | Date of | Date of | Name of the Board          | Examination    | Distinction | Subjects (Please mention field   | Percentage | Date of |
|-----|------------------------------|---------|---------|----------------------------|----------------|-------------|----------------------------------|------------|---------|
| No. |                              | entry   | leaving | / University / Institution | / Degree /     |             | specialization, honours, etc, of |            | passing |
|     |                              |         |         |                            | Diploma passed | Division    | where applicable)                | C.P.I.     |         |
| 01  |                              |         |         |                            |                |             |                                  |            |         |
| 6 3 |                              |         |         |                            |                |             |                                  | ,          |         |
| 02  |                              |         |         |                            |                |             |                                  | 7          |         |
|     |                              |         |         |                            |                |             |                                  |            |         |
| 03  |                              |         |         |                            |                |             |                                  |            |         |
| 6 3 |                              |         |         |                            |                |             |                                  |            |         |
| 04  |                              |         |         |                            |                |             |                                  |            |         |
|     |                              |         |         |                            |                |             |                                  |            |         |

12. Details of employments: Please give particulars of your present and past employments in chronological order, starting with the present one:

| SI.<br>No. | Organisation / Institute | Position<br>held | Nature of duties / work | Date of joining | Date of<br>leaving | Last Pay & Scale<br>of pay | Additional remarks about experience, if any.* |
|------------|--------------------------|------------------|-------------------------|-----------------|--------------------|----------------------------|---|
|            |                          |                  |                         |                 |                    |                            |   |
|            |                          |                  |                         |                 |                    |                            |   |

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me and that all the entries in this form are true to the best of my knowledge and belief.

| Place: |                            |
|--------|----------------------------|
| Date:  | Signature of the Candidate |