

भारतीय सूचना प्रौद्योगिकीअभिकल्पना एवं विनिर्माण संस्थान, कर्नूल

Affix self-attested
Passport size
Photograph

INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, DESIGN AND MANUFACTURING, KURNOOL

Jagannathagattu, Dinnedevarapadu, Kurnool-518002, Andhra Pradesh, INDIA (An Autonomous Institute under MHRD, Govt. of India)

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(All the columns are to be filled in neatly in capital letters or printed on A-4 size paper)

APPLICATION FOR THE POST OF	
Advertisement No	
1. Name of the Applicant:	
(BLOCK LETTERS ONLY)	
2. Date of Birth:// Age (as on la	ast date of receipt of applications):
3. Sex: Male/Female:	4. Nationality:
5. Father's / Husband's Name:	
6. a. Postal address for communication:	
b. Permanent Address:	
7. a. Telephone No. &Mobile No.	÷
b. E-mail (compulsory)	:
c. Fax No.	:

	rement under central/st	cate				
Governme	nt rules					
	ever been convicted by a	a court of law	or is there a	ny criminal cas	se	
11. Education	nal Qualifications startin	g from Class	X (Attach cop	oies of certifica	tes / mark shee	ets, etc.)
Examination Passed	Board/ University	Duration	Year of passing	Division With %o	Sub	jects studied
Note: Qualific	cation claim must be su	pported by t	 the documen	tary evidence:	s.	
12. Details of	employment starting wi	th the most r	ecent (attach	separate sheet	t, if necessary)	
Doot-hold	Department/	Period of e	mployment	Scale of pay	Present/last pay & Gross Amount	Nature of duties
Posts held	Organization/Company	From	То			

8. Whether belongs to SC/ST/OBC(only NCL)

Note: Experie	nce claim must be supp	orted by th	e documenta	ry evidences a	s per Annexure	9-I.
13. In case the	e present employment is	held on dep	outation			
basis, pleas	se state					
(a) Tl	ne Date of initial appoint	ment	:			
(b) Po	eriod of appointment on	deputation,	/contract:			
(c) Na	ame of the office/organiz	zation to wh	ich you belon	g :		
14. Additional	l details about present ei	nployment				
Please stat	Please state whether working under (indicate the name					
Of your employer against the relevant column)						
(a) Central Government						
(b) Autonomous Organization						
(c) Others						
15.Are you in	revised scale pf pay? If y	es, give the	date			
From which	h the revision took place	and also inc	dicate the			
Pre-revised	l scale					
16. Total emo	luments per month:					
17. Describe	briefly thespecialized pro	ofessional e	xperiences, sk	tills and expert	ise, you have a	cquired:
Additional information, which you would like to mention in support of your suitability for the post.						

(Attach extra sheets ifrequired)

18. If a	ppointed, how much time y	ou require for joining the	post:		
19. Any	other relevant information	ı:			
					-
20.Nan	ne, Address, Telephone No. a	and E-mail ID of at least tv	wo referees:		
1.					
2.					
21. Det	ails of Enclosures: Self att	ested copies of certificate:	s for proof of Age, Qua	alification & Experienceetc	
		•		·	
	a	b		_	
		d		-	
22. Rer	nark:	Do	claration		
		De	Ciaration		
1.	being applied by me and	all statements made and i		nstructions and details perta d in this application are true	
2.		e not concealed any mate		ich may debar my candidat ng category, age or educatio	
3.	etc. made in my applicatio	on form. ough the vacancy circula	r and I am well awa	are that curriculum vitae du	_
Place: _					
Date: _	Signature	of the candidate			

Certificate

(To be given by the Head of the organization)

Certified that the particulars have been verified and found to be correct. It is also verified that no disciplinary/ vigilance case is either
pending or contemplated against the office. Integrity of the officer is also verified.
Place:

Signature and seal of the Head of the Organization

Date: