Electronics and ICT Academy, PDPM INDIAN INSTITUTEOF INFORMATIONTECHNOLOGY DESIGN AND MANUFACTURING, JABALPUR

Application form for E&ICT Positions

Please read the instructions in the advertisement carefully before filling the form

A:	P	ers	on	al l	De	tail	S

	Advertisement No.															
2.	2. Post Applied for															
3.	Sl. No of the post															
4.	Specialisation (Major/	'Minor)										P.	aste y	our r	ecen	t
5.	Gender (mar	k √)	Ma	le		Fen	nale		Transgender		er	ļ	hoto	with	self-	
6.	Marital Status (mar	k √)	Ma	rried				Single					att	estatio	on	
7.	Category (mark√)		PH													
8.			UR			OBC (NC)		SC		ST						
	Name in Full															
9.	(Underline Surname)															
10.	Father's Name															
11.	Permanent Address															
12.	Address for															
	Correspondences															
13.	Emails	Primary e	mail:													
		Alternate e	email:													
14.	Mobile No.															
15.	Landline Phone No.															
16.	Date of Birth	D D N	1 M	Y	Y Y	Y	Age	e as on	(01.08.20	18)		Y	Y		M	M
	Nationality															

B: Academic Details:

17. Academic Records starting with high school: (All fields are mandatory to fill, except the rank field)

Degree/ Exam	University/ Board/ College	Year	Percentage of marks	Division	Rank (if any)
X					
XII					
Graduation					
Post					
Graduation					
Any other					
Degree					
()					

C: Employment Details (Current employment first) NOTE:- Please enclose experience certificate(s) as Annexure(s)

18:

S. No.	Employer	Position held(Regular/Contractual)	Date of	Date of	Gross and Net salary	Pay and Grade pay	Reasons for
No.		Helu(Regular/Contractual)	Johning	Leaving	Net Salai y	(if in a	leaving
						govt. job)	
1.							
2.							

Thr	ree References	(at least one of them sho	ould be f	familiar with	your recent w	ork)(email/mobile	e no. mandatory)			
	ame:				Designa	tion:				
	ddress:				1 3 8					
Er	mail:									
_	none no.				Mobile:					
_	ame:				Designa	tion:				
Ac	ddress:	ress:								
_	mail:				1					
_	none no.				Mobile:					
_	ame:				Designa	tion:				
Ac	ddress:									
Er	mail:									
Pł	hone no.				Mobile:					
	ork Experience Duration	Organization	Job profile and your role (Please provide details of work done, responsibilities assigned and any initiative that you took in improving the services \quality or anything related to your work							
			Servic	es (quanty c	anyuning reia	ted to your work				
	ministrative Exp			Title of		Notone	C			
Ľ	Period C	Organization		Title of pos	L .	Nature	e of work			
s. Ang	list for attachme	nitions: information you may lilents: Mark NA if not appontocopies attached				f required) hotocopies attache	ed (mark√)			
no.			√) Or NA		, 1	•				
01	NOC			12		complishment men	itioned in			
						on (please specify)				
02	Category cer			13	Other(s) plea					
02 03	Mark sheet /	Grade sheet Xth exam								
02 03 04	Mark sheet / Passing Certi	Grade sheet Xth exam ficate Xth exam		14						
02 03 04 05	Mark sheet / Passing Certi Mark sheet / exam	Grade sheet Xth exam ficate Xth exam Grade sheet XIIth		14 15						
02 03 04	Mark sheet / Passing Certi Mark sheet / exam Passing Certi	Grade sheet Xth exam ficate Xth exam		14						

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09

sheet

Degree of Graduation

Master level degree Mark sheet/

		Grade sheet		
	10	Degree of Masters	20	
Γ	11	Experience Certificate(s)	21	

Declaration

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that all
entries in this form as well as in the attached sheet(s) are true to the best of my knowledge and belief. I also declare that I
have not wilfully suppressed any information. Further if any of the above information found wrong/ incorrect, my
candidature will be treated as cancelled at any time. There are enclosures with a total of pages
attached with this application form.

Date:	Signature of Applicant
Place:	Name of Applicant