

Dighi Hills, Pune 411015

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APPLICATION FORM (FOR TEACHING POST)

To
The Principal
Army Institute of Technology
Dighi Hills
Pune 411 015.

Photo

Sir,

I wish to apply for a position in your Institute. The relevant details are as follows:

1. POST APPLIED FOR:

2. PERSONAL INFORMATION:

2.1 Full name:

.....
(in **CAPITAL** letters) (First name) (Middle Name) (Surname)

Name as per PAN Card only.

2.2 Address for correspondence:

.....

2.3 Permanent address:

.....

2.4 Contact Details: Telephone: **Cell Phone:**

2.5 E-mail address:

2.6 Date of Birth:/...../..... **Age:** **Marital Status:**

2.7 Category: **Religion:** **Caste:** **Sub-Caste:**

3 . ACADEMIC QUALIFICATIONS: (In reverse order from higher qualification up to S.S.C.)

Sr. No.	Qualification / Degree	Year of passing	Principal / Special subject's	School / College / Institute	Board / University	% of marks	Class / Grade
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1							
2							
3							
4							

5							
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4 WORK EXPERIENCE: (In reverse order starting with current employment)

Sr. No.	Post	Period			Institute / Management	Last salary drawn
		From	To	Total Experience		
(1)	(2)	(3)	(4)		(5)	(6)

4.1 Total Teaching Experience: _____**4.2** Total Industry Experience: _____**5 RESEARCH EXPERIENCE AND PUBLICATIONS:**

Sr. No.	Database	Number of Publications	Out of which no. of Publications at the level of Associate Professor	No. of Publication after PhD.
1	Scopus Indexed			
2	Web of Science			
3	UGC Care List			
4	UGC Journals (Old List)			
5	Patents			
6	PhD			

Sr. No.	Title Of Paper	Details of Journals	Volume/ Issue No, & Page No.	Date /Month of Publication	Description (Scopus Indexed/Web of Science/UGC Care List/ UGC Journals-Old List)

Sr. No.	Title Of Paper	Details of Journals	Volume/ Issue No, & Page No.	Date /Month of Publication	Description (Scopus Indexed/Web of Science/UGC Care List/ UGC Journals-Old List)

6 LANGUAGES KNOWN

Language	Read	Speak	Write

7 EXTRA –CURRICULAR ACTIVITIES:

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8 HOBBIES:

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9 SPECIAL ACHIEVEMENTS:

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10 ANY OTHER INFORMATION:

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11 REFERENCES:

(1)

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(2)

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I hereby certify that the information given in this application is true and correct to the best of my knowledge and belief. I understand and agree that misrepresentation or omission of relevant facts will justify cancellation of application.

Date:

Place:

(Signature of the Applicant)