Application Form

Project Associate-1/Principal Project Associate position in a MEITY funded project at IIT Bhilai

| Position Applying for | | | | |
|------------------------------|------|-------------------|---------------------------|--|
| Personal Details | | | | |
| Name | | | | |
| Date of Birth (DD/MM/YY) | | | Gender Male/Female | |
| Marital Status (DD/MM/YY) | (| | Category Gen/SC/ST/OBC | |
| Nationality | | | | |
| Mailing address | | Permanent Address | | |
| | | | | |
| Mobile/phone num | ıber | | | |
| Email | | | | |

| | Education Details (starting from matriculation) | | | | | | |
|-----------|---|------------|-------------------|-----------------------|--------------------|-----------------------------|----------|
| S. No. | Degree | Discipline | Univ./ College | Regular/ Part time | Year of Passing | % of Marks/ CGPA/ CPI | Division |
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| Qualifying Ex | xaminations (C | CSIR/NET/GAT | TE/ Others) | | |
|---------------|----------------|--------------|-------------|------------|-------------------|
| Examination | Branch | Year | Valid Up to | Percentile | All India Rank |
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| Professional Experience (Research/Industrial/Teaching/Others) | | | | |
|---|-------------------------------|------|-------|--|
| Name of Organization | e of Organization Designation | | ation | Nature of work (attach separate sheet if |
| Trume of Organization | Designation | From | То | necessary) |
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| Research Publications: | | | | | |
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| Awards, Patents, Prizes: | | | | | |
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| Any Other Relevant Information: | | | | | |
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DECLARATION

I hereby declare that I have carefully read the instructions and particulars and that the entries made in this application form are correct to the best of my knowledge and belief. If selected for admission, I promise to abide by the rules and discipline of the institute.

I note that the decision of the institute is final in regard to selection for admission and assignment to a particular department and field of study. The institute will have the right to expel me from the institute

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

at any time after my admission, provided it is satisfied that I was admitted on false particulars furnished by me or my antecedents prove that my continuance in the institute is not desirable. I agree

that I shall abide by the decision of the institute, which will be final.