** NATIONAL INSTITUTE OF TECHNOLOGY, RAIPUR**

 **(Institute of National Importance)**

 **G.E. Road, Raipur – 492010**

**Application for the Post of Laboratory Assistant**

**(Special Recruitment Drive for PWD Candidates)**

**1)Advertisement No: NITR/ R-1/Advt./……...Advt. Date: ……………2015**

**Note: Prospective candidates are advised to study the Instructions carefully and then fill up the application in all respects. No column should be left blank. Incomplete application will be rejected. Attach additional sheets, if required. However, information given must be precise to the point.**

**2) Fee Remittance**

**Bank / Place :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DD No \_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

3) Name of Applicant : : …………………………………………………………………

(Affix recent passport size color photograph duly signed by applicant)

 **(in full capital)**

4) Father’s Name : …………………………………………………………………

a) Spouse Name : …………………………………………………………………

5) Mother’s Name : …………………………………………………………………

6) Date of Birth :

|  |  |  |
| --- | --- | --- |
| **Day** | **Month** | **Year** |
|  |  |  |

7) Age : Year……………..Month…………….. Days……………

 **(As on 05.10.2015)**

8) Nationality : …………………………………………………………………

9) Religion : …………………………………………………………………

|  |  |  |  |
| --- | --- | --- | --- |
| Male |   | Female |   |

10) Gender :

11) Marital Status : …………………………………………………………………

**Signature of Applicant**

**Page 1 of 5**

12) Address

|  |  |
| --- | --- |
| For Communication | Permanent |
|   |   |
| State: Pin: | State: Pin: |

Phone (R) :………………………………... E-mail :………………………………...

Phone (O) :………………………………... Mobile :………………………………...

13) Category

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SC\* |   |  | OBC\* |   |
|  |  |  |  |  |
| ST\* |   |  | UR |   |

(Put √ marks)

**(\*Attach a certificate from the competent authority prescribed by the Government of India)**

 14) Nature of disability……………………………..

 VH [ ] HH [ ] OH [ ] Disability………………… (%)

**(\*Attach a certificate from the competent authority as prescribed under government rules)**

15) Educational Qualification (Matriculation onwards) (Attach attested copies)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr. No | Examination/Degree | Board/University | Subjects | Month and Year of Passing | Percentage/Division | Marks Obtained/Total Marks |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |

**Signature of Applicant**

**Page 2 of 5**

16. Experience (Attach attested copies)

(Use separate sheet if required and enclose self attested supporting documents)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr. No.**  | **Organization** | **Designation, Nature of duties and responsibilities** | **Duration** | **Pay Scale & Grade Pay** | **Total Emoluments** | **Permanent/Temporary/Contract** | **Length ofService in  Years &  Months**  |
| **From** | **To** |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |

17) Present employment

Name of the Organization : ……………………………………………………

Post Held : ……………………………………………………

Date of Appointment : ……………………………………………………

Nature of duties and responsibilities : ……………………………………………………

(Attach separate sheet if required)

Pay Band Academic Grade Pay/Grade Pay : ……………………………………………………

Whether Permanent / Contract : ……………………………………………………

Temporary/ or on Probation : ……………………………………………………

Length of Service : ……………………………………………………

Whether State / Central : ……………………………………………………

Government / PSU /Private : ……………………………………………………

18) Other Information: Refresher/Orientation Courses/Training, FDP/.Conferences/Workshop, etc., attended (Please attach sheets if required)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. No. | Title of programme &Name of Sponsor  | Institution in which attended | Year | Duration of Programme |
|  |  |  |  |  |
|  |  |  |  |  |

**Signature of Applicant**

**Page 3 of 5**

19.) Knowledge of languages

|  |  |  |  |
| --- | --- | --- | --- |
| Language  | Read | Write | Ability to Speak fluency |
|   |   |   |   |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

20. Character & Antecedents Report

|  |  |
| --- | --- |
| **Subject** | **Remarks** |
| Have you ever been subject to any disciplinary action? If so give full details |   |
| Have you ever been dismissed/suspended from service/employment, if so please give full details |   |
| Were you involved in any criminal case? If yes, give full details |   |
| Is any criminal case pending against you in the court? If yes, give full details |   |

21. Names and Addresses of minimum two Referees (including e-mail/phone)

 (All of them should be familiar with your Academic/Professional work)

|  |  |
| --- | --- |
| **Name and Address** | **Name and Address** |
|  |  |
| **Phone No.** | **Phone No.** |
| **E-mail:** | **E-mail:** |

22. List of enclosures:

01)……………………………………………………………….

02)……………………………………………………………….

03)……………………………………………………………….

04)……………………………………………………………….

05)……………………………………………………………….

**Signature of Applicant**

**Page 4 of 5**

06)……………………………………………………………….

07)……………………………………………………………….

08)……………………………………………………………….

09)……………………………………………………………….

10)……………………………………………………………….

11)……………………………………………………………….

12)……………………………………………………………….

13)……………………………………………………………….

14)……………………………………………………………….

15)……………………………………………………………….

**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 attached sheets are true to the best of my knowledge and belief. At any stage if any of the information furnished by me is found to be false or incorrect, suitable action may be taken against me. If selected, I promise to abide by the rules and regulations of the NIT Raipur.

Date: Signature:

Endorsement of the present employer Signature of the Employer

(if already employed). Name:

Office seal with date: Designation:

**Signature of Applicant**

**Page 5 of 5**