



राष्ट्रीय प्रौद्योगिकी संस्थान रायपुर
NATIONAL INSTITUTE OF TECHNOLOGY RAIPUR
G.E. Road, Raipur-492010, Chhattisgarh

**APPLICATION FORM FOR RECRUITMENT OF TRAINEES ON PURULY CONTRACT BASIS IN
CENTRAL COMPUTER CENTER**

(All the columns are to be filled compulsorily in neatly in capital letters, scanned and then sent to recrt.ccc@nitrr.ac.in)

1. Advertisement No. : **No./NITRR/R-1/2021/57**, Raipur, Dated: 16/02/2021

2. Name of the post applied for : _____

3. Name of the Applicant : _____

a. Postal Address for Communication : _____

b. Permanent Address : _____

4. a) Mobile No. : _____

b) E-mail : _____

5. Father's / Husband Name : _____

6. Date of Birth : _____
(as per SSC/SSLC/HSLC)

7. Gender : Male/Female

8. Nationality : _____

9. Have you ever been convicted by a court of law or is there any criminal case/disciplinary action / vigilance enquiry pending against you?

If yes, specify _____

10. If appointed on contract, how much time will you require for joining the post?

Cont.....

Affix self
attested
passport
size
photograph

11. Education/Professional Technical Qualifications (Attach self attested scanned copies of certificates / mark sheets etc. along with this form)

Full Name of the Examination Passed	Board/ Institute University	Duration of Degree/Diploma Training	Year of passing	Division with % Marks	Subjects(s) studied	Specialization

12. Details of employment in reverse chronological order. (Attach self attested scanned copies of certificates. along with this form)

Full Name of the Organization/Department/Institute	Post held	Regular /Temporary /Permanent /Contract	Period of employment		Period of each Employment in Years/Months	Pay Scale	Gross Monthly Emoluments
			From (DD/MM/YY)	To (DD/MM/YY)			

I _____ hereby declare that the statement made in this application are true, complete and correct to the best of my knowledge and belief and in the event of the information being found false or incorrect or any ineligibility being detected before or after the selection, my candidature is liable to be cancelled and action may be initiated against me.

(Name of the applicant)

(Signature)

(Place)

(Date)

