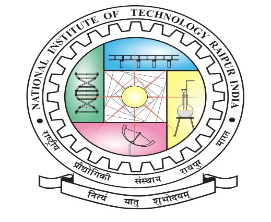
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**National Institute of Technology Raipur**

G.E. Road, Raipur – 492010 (C.G.)

(An Institute of National Importance)

Phone: +91-771-254200; Fax: +91-771-2254600

Website: [www.nitrr.ac.in](http://www.nitrr.ac.in)

**Application Form for JRF in Information Technology for IITTNiF Sponsored Project**

Self-attested Photograph

|  |  |
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|  |  |
| **To**  **Dr. Rajesh Doriya**  **Assistant Professor (Gr-I)**  **Dept. of Information Technology**  **National Institute of Technology Raipur**  **Raipur – 492010, C.G., India** |  |

|  |  |  |
| --- | --- | --- |
| GATE/NET qualified (Please tick √) | Yes / No If yes, discipline: | |
| If yes, please provide details | Exam: | Year: |
| Rank: | Score/Percentile: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Name in full (in capital letters) (Underline Surname) | |  | | | |
|  | Father’s / Husband’s Name | |  | | | |
|  | Mother’s Name | |  | | | |
|  | a. Marital Status | |  | b. Male / Female/ Others | |  |
|  | a. Permanent address | | | b. Address for correspondence | | |
| Mobile No. |  | | E-mail ID |  | |
|  | Date of birth (DD/MM/YYYY) | | |  | | |
|  | Category (Please tick √) | | | SC / ST / OBC / PWD / General | | |
|  | Nationality | | |  | | |
|  | No. of research publications, if any  (**Enclose the list**) | | | SCI Journal - Other Journal - Conference –  Book Chapter/Book - | | |
|  | Additional information, if any | | |  | | |

1. Details of educational qualifications: Please give particulars of all examinations passed and degrees obtained commencing with the 10th standard / Matriculation.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.  No. | Examination  / Degree / Diploma passed | Name of the Institute/College | Name of the Board  / University / Institution | Class / Division | Discipline | % of marks or CGPA out of 10 | Year of  passing |
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1. Details of employments: If employed, please give particulars of your present and past employments in chronological order, starting with the present one:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.  No. | Organisation / Institute | Position held | Nature of duties / work | From  Date | To  Date | Experience  (\_\_Yr.\_\_Months) | Last Pay scale & Gross pay |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me and that all the entries in this form are true to the best of my knowledge and belief. I fully understand that if it is found that any information given in the application is incorrect/false or if I do not satisfy the eligibility criteria at a later date, my candidature/appointment is liable to be cancelled.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: ................................  **Signature of the Candidate**

Place: ..............................