



केन्द्रीय प्रौद्योगिकी संस्थान कोकराझार
CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR
Deemed to be University, MoE, Govt. of India
Kokrajhar-783370, Assam

www.cit.ac.in

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Advert. No. No.CITK/Cont.Faculty/331/2024/_____

Dated:___/___/2024

(Please read carefully the instructions & conditions enclosed herewith before filling the form)

1.	Name (In Capital)										
2.	Father's/Husband's Name										
3.	Mother's Name										
4.	Post applied for										
5.	Advt. No.										
6.	Department/Subject										
7.	Field of specialization										
8.	Date & Place of Birth (please attach true copy of certificate):										
9.	a. Marital Status					b. Male/Female					
10.	a. Nationality					b. Religion					
11.	Permanent Address:					* Correspondence Address:					
					
					
					
					
	PIN Code:					PIN Code:					
12.	Mobile/Phone: (Including STD)					E-mail ID					
13.	Please state your category (Gen/SC/ST/OBC):										

* If any change in address should at once be communicated to the Registrar, Central Institute of Technology, Kokrajhar, BTAD, Assam-783370, India.

14. Details of educational qualifications: Please give particulars of all examinations passed and degrees obtained commencing with the High School Leaving (10th standard / Matriculation) Examination. For Ph.D., please give details, even if it is not complete. Please attach true copies of certificates and mark sheets duly attested.

Sl. No.	School / College / Institute	Date of Entry	Date of Leaving / Ph.D thesis submission	Name of the Board / University / Institution	Examination/ Degree / Diploma passed	Distinction / Class / Division	Subjects (Please mention field of specialization, honours, etc, where applicable)	Percentage of marks or C.P.I.	Date of award

15. Details of employments: Please give particulars of your present and past employments in chronological order, starting with the present one :

Sl. No.	Organization / Institute	Position held	Nature of duties / work	Date of joining	Date of leaving	Last Pay (Pay Band and Grade Pay)	Additional remarks about experience, if any.*

* Please specify, if the position is: (i) Pre-Ph.D, (ii) Post-Ph.D, or (iii) Concurrently with Ph.D
 NB: If space is not sufficient, information may be provided in separate sheet.

16. Title of Research Dissertations:

Degree	Institute/University	Date of submission and award	Title of the work/Subject
Masters Level			
Doctor Level			

17. Is NET/SLET/GATE qualified? YES/NO

If YES, attach documentary proof.

18. Achievements (like Ranks, Positions, Awards in Academic & other Activities)

Sl. No.	Programme	Rank/Position

NB: If space is not sufficient, information may be provided in separate sheet

19. Thesis Supervised

(a) Ph.D

Sl. No.	Title of Thesis Supervised	Completed (Year)	Principal or Co-Supervisor

NB: If space is not sufficient, information may be provided in separate sheet

(b) Master Degree in relevant subject.

Sl. No.	Title of Thesis Supervised	Completed (Year)	Principal or Co-Supervisor

NB: If space is not sufficient, information may be provided in separate sheet.

20. List of Publications:

(a) International Journals

Sl. No.	Name of the Journal	Volume No.	Month/Year/ Page No.	Authors	Title of the paper

NB: If space is not sufficient, information may be provided in separate sheet

(b) National Journals

Sl. No.	Name of the Journal	Volume No.	Month/Year/ Page No.	Authors	Title of the paper

NB: If space is not sufficient, information may be provided in separate sheet.

21. Research Projects & Consultancies:

Sl. No.	Title	Agency	Period	Grant/Amount mobilized (Rs. Lakhs)

NB: If space is not sufficient, information may be provided in separate sheet

22. Papers Presented in Conferences, Seminars, Symposia, etc.

Sl. No.	Title of the paper presented	Title of Conference/ Seminar	Date of the event	Organized by	Whether International/National/ State/Regional/University or College Level

NB: If space is not sufficient, information may be provided in separate sheet

23. Participation in Conferences, Seminars, Workshops, Symposia, Training Programmes, etc.

Sl. No.	Programme	Duration	Organized by

NB: If space is not sufficient, information may be provided in separate sheet.

24. Extra-Curricular Activities:
-
25. Any other Information:
-

26. I hereby declared that the entire information furnished in this form are true to the best of my knowledge. If at any time, I am found to have declared any material/information or given any false details, my appointment shall be liable to be summarily terminated without any notice or compensation.

Place:

Date:

Signature of the Applicant