



**INDIAN INSTITUTE OF TECHNOLOGY BOMBAY
POWAI, MUMBAI – 400 076**

Please Affix a recent photo here with signature

Advertisement No. _____ dated _____

1. Post applied for: _____ in the Lab _____, Department of _____

2. Name in full (Capital letters): _____
(Surname) (First Name) (Middle Name)

3. Date of Birth ____/____/____

4. Father's name/Husband's name _____

5. Address for correspondence: _____

_____ Pin code _____

Tel. No. _____ Mobile No. _____

(STD CODE) (NUMBER) Email ID: _____

6. Permanent address: _____

_____ Pin Code _____

7. Marital status: _____ 8. Nationality: _____

9. Gender (Please tick appropriately) M F

10. Category GEN/ SC/ ST/ OBC(noncreamy layer)/ Physically Handicapped _____
(Please attach attested copy of certificate)

11. Religion : _____

12. Educational Qualifications (SSC onwards – Please attach xerox copies) :

Examination/ degree	Branch	% of Marks/ class	Name of College/ University/Board	Year of passing

13. Other / Technical Qualifications: (Please attach xerox copies)

Course name	% of marks/ class	Name of Institution	Year of Passing	Duration of course

14. Details of Employment: (starting with the most recent) (Please attach xerox copies of certificates)

(Particulars of all previous and present employment are to be furnished including training/ apprenticeship undergone, if any)

Name of Organization	Designation	Period		Nature of duties	Reasons for leaving
		From	To		

15. Are you under any Contractual obligation to serve the Central/ State Govt./ any other Public Sector Undertakings. If so please furnish full details.

16. Are you in receipt of any Pension, Gratuity or Employer's share of contribution of Provident Fund from Central/ State Govt. or any Public Sector Undertaking? If so please give particulars there of :

17. Languages known to speak, read & write

(Please tick in the applicable boxes)

Language	Speak	Read	Write

18. Details of relatives already employed in Indian Institute of Technology Bombay :

Name of relative	Relationship	Department in which employed	Department in which employed

19. Any other information :

(Attach separate sheet, if needed)

20. I hereby declare that all information given by me in this proforma is complete & correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage, my candidature is liable to be cancelled. I also declare that I have gone through the instructions and I understand the same.

Date:

Place:

Signature of the Applicant
Name :