APPLICATION FORM FOR EMPLOYMENT IN PUNJAB INSTITUTE OF MANAGEMENT & TECHNOLOGY, Village--Alour, Tehsil-Khanna (Dist-Ludhiana)

Village--Alour, Tehsil-Khanna (Dist-Ludhiana)

(To be filled in by applicant in his/her own handwriting)

Application for Appointment as ______ Department/ Subject ______

1. Name in full Mr./Mrs./Ms:______ (in block letters)

. Name in full Mr./Mrs./l	Ms:			
(in block letters)				
Father's /Husband's Na	me: Mr			
(in block letters)				
Date of Birth:	Present Age:	Years	Sex: M/F	_
Marital Status	XX71 41 1	-1i 4- CO/6	TT/DC/C1.	
	Whether be lence: (in block letters)			
Address for Correspond				
Address for Correspond Telephone Nos:	lence: (in block letters)	:		
Address for Correspond Telephone Nos: Aadhaar Card no	lence: (in block letters) E-mail	:ard no		
Address for Correspond Telephone Nos: Aadhaar Card no	lence: (in block letters) E-mail, Pan ca	:ard no		

3. Educational Qualification: (Please attach one set of attested copies of your certificates)

Examination	Name of School/ College/ Institute	Name of Univ/ Board	Main Subjects	Year of passing	Regular/ Distance Education	Marks obtd. (with max. marks)/ Percentage of marks	Class/ Div/	Remarks
Matric								
10 +2 /								
premed/								
pre								
BA/B.Sc/ B. Com/BBA/B CA/B.Tech etc								
MBA/MCA/ M. Tech/etc								
UGC/NET								
Ph .D								
M.Phil								
Any other								

Note: Please indicate break in studies, if any, with reasons, thereof.

College/ I	Name & address of		Date of			ure of	Basic pa	-	Reasons for	
College/ Institute.		Joinir	ng Leavi	ng	Job		p.m & grade	leav	leaving	
5. Admii	nistrative ex	xperience	(if any)							
Name & Address of	Dat	e of	0	Nature		Main		Reaso		
College	College/ Inst.	Joining	Leaving		of Job	Respor	onsibilities	pay p.m & grade	for leavi	
(ii) Postgra (iii) Degra (iii) Any 7. Public 8. Extra I, above found	other rations (if a Curricular information to be inco	Subjects sses ny): Activities	taught:		ne applica	ant) do nd belie	To hereby deef. If any i	clare that	n is	
agains	t IIIC.									
Place:										
						Signat	ure of App	licant		
			FOR C	OFFICE USE	ONLY	Signat	cure of App	licant		
	Suitable /	Not Suita	<u></u>	OFFICE USE				olicant		
Date:			ıble :				_	olicant		
Date:	Date of Ir	nterview i	ible : f suitable :					olicant		
	Date of Ir	nterview in Result o	nble: f suitable: of Interview				- -	olicant		

4. Reference:

Chairman