



राष्ट्रीय प्रौद्योगिकी संस्थान मणिपुर
NATIONAL INSTITUTE OF TECHNOLOGY MANIPUR

Langol, Imphal (Manipur), Pin 795004,

Ph: (0385)2058566/ 2445812

Email: director@nitmanipur.ac.in, Website : www.nitmanipur.ac.in

An Autonomous Institute under MHRD, Govt. of India

Application Form

Affix
selfattested
passport
size
photograph

1. Full Name (Block Letters) : _____

2. (a) Advertisement No. : _____

(b) Post applied for : _____

(c) Specialization : _____

3. Date of Birth : _____

4. Father's Name : _____

Mother's Name : _____

5. Nationality & Religion : _____

6. Present Postal Address : _____
(in block letters) _____

7. Permanent Address : _____
(in block letters) _____

8. Tel. No: Landline (with STD : (O) _____
code)

: (R) _____

Mobile No.



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: _____

9. Email ID : _____
Whether belongs to : _____
SC/ST/OBC/PHD

10. Marital Status : _____

11. Languages known(Read,
Write, Speak)

1. _____

2. _____

3. _____

12. Education qualifications (Starting with the highest degree)

Degree awarded/Examination passed	Univ./Board	Year of passing	Percentage of marks obtained/CGPA	Subject(s)
PhD				
MSc/M.Tech				
BSc/B.Tech				
Senior Secondary (Plus Two)				
High School				
Others				

13. Topic of Thesis

(a) For MSc/M.Tech. _____

(b) For Ph. D. _____

14. Field of specialization _____

15. List of all your previous employments in order (Most recent first)



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Sl. No.	Name of Employer	Designation	From	To	Salary Details	Brief description of duties	Reasons for leaving
(i) Teaching							
(ii) Other than teaching							

16. (i) Present Scale of Pay _____ (ii) Basic Pay _____

(iii) Date of Next Increment _____ (iv) Gross Pay _____

(v) Basic Pay acceptable _____

17. Details of visits to Foreign Countries: (In case of visits relating to his profession only)

Sl. No.	Country Visited	Period of Stay		Purpose of Visit
		From	To	

18. Research activities undertaken (Specify total No. and attach list of publication in the each category as per format given)

(a) Paper publications in International Journals

Sl No	Title of paper	Co-author(s), if any	Name of the Journal	Vol. & Year	Pages



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(b) Paper publications in National Journals

Sl. No.	Title of paper	Co-author(s), if any	Name of the Journal	Vol. & Year	Pages

(c) Papers publication in International Conferences

Sl. No	Title of paper	Co-author(s), if any	Name of the Conference	Date & year

(d) Papers publication in National Conference

Sl. No	Title of paper	Co-author(s), if any	Name of the Conference	Date & year

(e) Details of M Tech students guided/ Continuing

Sl. No.	Name of Student	Year	Title of the Dissertation

(f) Details of PhD Students guided/ Continuing

Sl. No	Name of Student	Year	Title of the Dissertation

(g) Patents registered/ filed (with registration No. & date)

Sl. No	Title	Registration	Date



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19. Books/Monographs written / under process:

Sl. No.	Name of book/ monograph	Name of Co-author, if any	Year of Publication	Publisher with address

20. Consultancy works undertaken:

Sl No	Period	Organization	Nature of Work	Co-consultant, if any

21. Seminars/ShortTermCourses/SummerSchools/WinterSchoolsorganized

Sl No.	From	To	Name of the Course	Sponsored by	No. of participants	
					From institutes	From Industry

22. Seminars/ShortTermCourses/SummerSchools/WinterSchoolsattended

Sl No.	From	To	Institute/Industry	Sponsored by	Name of the Course

23. Sponsored Projectsunder taken

Sponsoring Agency	Title of the Project	Area	Period	Amount of grant	Whether completed	Accomplishment

24. Membership of Professional Bodies

Sl. No.	Name of Professional Bodies	Grade of membership	Membership no. With validity



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25. Administrative Responsibilities held/ Continuing

Sl. No.	From	To	Position held	Responsibilities

26. Awards/Recognitions won, if any: _____

27. Period required for joining the post, if selected _____

28. Brief details of Co-curricular and extra-curricular activities:

Sl. No	Activity	from	to	Remarks

29. Any other relevant information you may like to furnish: (Attach separate sheets)

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30. References:

(Responsible persons, not related to the applicant but closely acquainted with academic and professional work)

Name and Designation	Address
1.	Phone _____ Fax: _____ :E-mail _____
2	Phone _____ Fax: _____ :E-mail _____
3	Phone _____ Fax: _____ :E-mail _____



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34. List of Enclosures

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35. Declaration

I certify that the aforementioned information is correct and complete to the best of my knowledge and belief.

Place _____

Date _____ (Signature of Candidate)