

# राष्ट्रीय प्रौद्योगिकी संस्थान,मणिपुर

# NATIONAL INSTITUTE OF TECHNOLOGY, MANIPUR

Langol, Imphal, Ph. (0385) 2058566 / email:- <u>nitmanipur@yahoo.in</u> An Autonomous Institute under MHRD, Govt. of India.

(in bloc	ne of the candidate k letters) vertisement No.				Affix self attested passport size photograph
(b) Pos	t applied for				
3 Date of	Birth	:	Distance Inc.		
4. Father's	Name	:			
Mother'	s Name		H Anneal	Straßbard An	Degree sources Leandbation nessed (starting root)
5. National	lity & Religion	:			nathreodation) 
5. Present I (in block	Postal Address (letters)				
7. Permane (in block	nt Address (letters)		tion et Mönsbre		
3. Tel. No: code)	Landline (with STD		(0)		
couc)		:	(R)		
Mobile N	Jo.	:			
. Email ID		:			

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10.	Whether belongs to	
	SC/ST/OBC/PWD	
11.	Marital Status	to the second
12.	Languages known (Read	1
	Write, Speak)	2
		3.

### 13. Education qualifications (Starting with the highest degree)

Degree awarded/ Examination passed (starting from matriculation)	Univ./Board	Year of passing	Percentage of marks obtained/ CGPA	Subject(s)
			ndiga 	Nationality A
			-6	These Greeking
				anikit Solid (i)

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

Sl. No.	Name of Employer	Designation	From	То	Salary Details	Brief description of duties	Reasons for leaving
							tebos



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#### 28. Period required for joining the post, if selected\_

#### 29. Brief details of Co-curricular and extra-curricular activities:

SI. No	Activity	from	to	Remarks
	Market Contractor			
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		and the second

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

#### 31. 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 :	

#### 32. List of Enclosures

1	v
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#### 33. Declaration

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

Place	
Date	

(Signature of Candidate)