APPLICATION FORM FOR ADMINISTRATIVE POSITIONS



INDIAN INSTITUTE OF ENGINEERING SCIENCE AND TECHNOLOGY, SHIBPUR HOWRAH - 711103

(Please Fill in BLOCK LETTERS)

Ad	Advertisement No.																				-				colou	ır
Post Applied For				INTERNAL AUDIT ADVISOR										photograph												
1.	. Name in Full (in BLOCK letters)																									
	Mar	ried			Si	ngle	9			Mal	e			-	Fen	nale			Oth	er		(P	leas	se ti	ck v	/)
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3.	3. Date of Birth							1						4. Nationality												
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5.	5. Religion																									

	Designation					
	Organisation					
	Date of Joining					
	Pay Level					
	Pay Band / basic Pa	y (Rs.)				
	Total Emoluments (per month) (Rs.)					
7.	(a) Tick-mark the a	ppropriate l	oox if you	belong to reserved OBC (NCL		EWS
	(b) Whether PWD	Yes		No		
	*(Please attach self-	-certified co	py of the	certificates)		
8.	Areas of Specialisat	cion				
9.	Employment :(Plea	se attach se	lf-certifie	d copies of experien	ce certificates)	
	Employer	Position H	leld	Date of Joining	Date of Leaving	Last Basic Pay with Grade Pay / Pay Level

6. Present Employment (if any):

10. Academic Records starting with Secondary Education (Pleas	e attach self-certified copy of the
certificates)	

Examination	Subjects	College/University/ Institute	Year	Percentage / Grade	Class / Division

11. Have you ever been discharged/suspended from any position of employment? If Yes, state reasons:

12. Name and addresses of three Referees (at least one of them should be from your present / past organization who is familiar with your recent work)

	1	2	3
Name			
Occupation or position			
Address			
E- mail			
Mobile No.			

a) Please indicate as to why you wish to join Indian Institution of Engineering Science and Technology, Shibpur
b) How would you meet the job requirements as advertised
14. I hereby declare that I have carefully read and understood the instructions as attached to this uploaded Application Format, and that all entries in this form as well as attached sheets are true to the best of my knowledge and belief.
There are sheets attached to this form.
Date:
Place: (Signature of Applicant)
Note: Use separate sheet if necessary for any of the above items.
List of enclosure:
1. 2.
3.
4.
5.

13. Statement of objectives (to be filled up in Candidate's own hand writing)