**Ballari Institute of Technology & Management, Ballari**

**Passport size Photo**

**APPLICATION FORM**

**Post Applied for:** ………………………………………………………………………………………..

|  |  |
| --- | --- |
| Name in full (Block Letters): |  |
| Father / Husband Name: |  |
| Mother Name: |  |
| Date of Birth & Age: |  |  Years |
| Permanent A/c No. (PAN)  |  |
| Aadhar No.: |  | Blood Group: |
| Religion: |  | Caste:  |
| Category:  | SC / ST / OBC / PH / GM. |
| Correspondence Address: |  |
| Permanent Address: |  |
| Contact No’s: Mobile No.Phone with STD Code: |  |
| E-Mail - I.D : |  |

**Educational Qualification:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Institution studied | Board / University | Specialization | Month & Year of Passing | Agg. Marks obtained with % & Division |
| 10th / SSLC / Equivalent Exam |  |  |  |  |  |
| 10+2/ PUC / Equivalent Exam |  |  |  |  |  |
| Diploma  |  |  |  |  |  |
| UG Degree |  |  |  |  |  |
| PG Degree |  |  |  |  |  |
| Doctorate Degree (Ph.D.)  |  |  |  |  |  |
| Others, if any |  |  |  |  |  |

**Experience:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name & Address of Employer | Post Held | Period (Date) | Last Basic Pay | Last Gross Salary drawn | Reasons for Leaving |
| From | To |
|  |  |  |  |  |  |  |
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| --- | --- |
| Total Teaching Experience at UG Level: | \_\_\_\_\_\_\_\_\_\_\_\_ Years |
| Total Teaching Experience at PG Level: | \_\_\_\_\_\_\_\_\_\_\_\_ Years |
| Total Industry Experience : | \_\_\_\_\_\_\_\_\_\_\_\_ Years |
| Total Research Experience: | \_\_\_\_\_\_\_\_\_\_\_\_ Years |
| Total Experience: | \_\_\_\_\_\_\_\_\_\_\_\_ Years |
|  |  |
| Research Papers Published (in last 3 years)No. of National Publications : |  |
| No. of International Publication : |  |
| No. of Conferences, Symposia, Seminars, Workshops Attended: |  |
| No. of PG Projects guided : |  |
| No. of Doctorate students guided : |  |
| No. of Books Published : |  |
| No. of Patents : |  |
| Any Other information: |  |
|  |  |
|  |  |
| Expected Salary: |  |
| If Selected time Required to report for the Duty : |  Days / month's |

Place:

Date:

Signature of the Applicant