

राष्ट्रीय प्रौद्योगिकी संस्थान मिज़ोरम

NATIONAL INSTITUTE OF TECHNOLOGY MIZORAM

(An Institution of National Importance under Ministry of Education, Govt. of India) चलत्लांग, आइज़ोल, मिज़ोरम / CHALTLANG, AIZAWL, MIZORAM – 796012

Phone: 0389 - 2391236 / 2391774 / 2391699 Email:

Email: registraroffice@nitmz.ac.in

Website: www.nitmz.ac.in

PRESCRIBED APPLICATION FORM FOR NON-TEACHING POSTS

(Candidates are advised to read General Instructions and Information, before filling up the Application Form)

Advertisement No. NITMZ/R-1-1	Dt: 28.10.2024			
NAME OF POST APPLIED:				
1. Name in Full:(In Block Letters)		attested recent		
Sex: Male / Female:		coloured passport photo		
2. a) Father's Name:		_		
b) Mother's Name:				
3. i) Address for correspondence: _				
-				
Phone No	Fax No			
Mobile No				
ii) Permanent Address :				
4. Nationality:	5. Religion:			
6. Date of Birth :	dd/mm/yy Age:	Years Months		
7. Category (UR / SC / ST / OBC /	EWS / PwD):			
In case of OBC, whether belong to N	Non-creamy layer Yes / No			

8. Particulars of Educational Qualifications (Attach separate sheet, if required):

Sl. No.	Degree Obtained & Branch / Specialization (specify)	Name of the Board/University & Institute	Year of Passing	Total Marks Secured / Full Marks	% of Marks / CGPA	Class/ Division
1	HSC/HSLC					
2	Higher Secondary					
3	Diploma					
4	Bachelor's Degree					
5	Master's Degree					
6	Ph.D					
7	Others (if any)					

9. Particulars of Technical/ Professional Qualifications (Mark sheets should be enclosed):

Sl. No.	Examination Passed	Name of the Board/ University/Institute	Year of Passing	Total Marks Secured/ Full Marks	% of Marks/ CGPA	Class/ Division
1						
2						
3						

10. Experience and details of employment, if any (Certificate should be enclosed):

Sl. No.	Name of Organization	Name of Post	Period	Nature of Work

11. Any other information relevant to the Post applied for:

12. APPLICATION FEES PAYMENT DETAILS:

Transaction Ref. No.	
Transaction Date:	
Bank:	
Amount:	

13. DETAILS OF TESTIMONIALS / CERTIFICATES / DOCUMENTS ENCLOSED:

N.B.: Every application must be accompanied by self attested photo copies of documents in support of claims made by the candidate in respect of date of birth, academic qualifications, training, experience, caste etc.

(Do attach self-attested copies of all documents/ certificates in support of the information furnished by you.)

1.	13.
2.	14.
3.	15.
4.	16.
5.	17.
6.	18.
7.	19.
8.	20.
9.	21.
10.	22.
11.	23.
12.	24.

Date: Name & Signature of the Candidate

DECLARATION BY THE APPLICANT

I, the undersigned, hereby declare that I have carefully read and understood the instructions and particulars provided by the Institute and affirm that all information that I have furnished is true to the best of my knowledge and belief.

I understand that I alone will be responsible for any consequences arising out of incorrect and / or incomplete information furnished in this application.

Place : Date :	
*******	******************
	NDORSEMENT BY FORWARDING AUTHORITY Its who are in service of Govt./ semi Govt. /PSUs/Universities/ Academic Institutions) (To be filled in by the present employer)
Forwarded the applica	tion of Mr./Ms./Dr
Place: Date:	Signature of the Forwarding Authority: Designation:
	Office Seal:

Summary Sheet
(To be filled by the candidate)

Name of the Cand	lidate :					
Contact Details	: Mob:				_	
Post Applied For	Email ID: :					_
Educational Qualif	ications:					
Certificate/ Degree	Name of the Institute / University	Obtained/		% of Marks/ Grade/Div.		For Office use
HSC/HSLC						
Higher Secondary						
Diploma						
Bachelor's degree						
Master's degree						
Any Other						
Experience (in yea	rs / Months)					
Post Held	Organization	Exp. In Yrs/Mnt		Salary Drawn		
Any other relevant Qualifications / Experience						
	Contact Details Post Applied For Educational Qualif Certificate/ Degree HSC/HSLC Higher Secondary Diploma Bachelor's degree Master's degree Any Other Experience (in year Post Held Any other relevant Qualifications /	Educational Qualifications: Certificate/ Name of the Institute / University HSC/HSLC Higher Secondary Diploma Bachelor's degree Master's degree Any Other Experience (in years / Months) Post Held Organization Any other relevant Qualifications /	Contact Details : Mob: Email ID: Post Applied For : Educational Qualifications: Certificate/ Name of the Year of Degree Institute / University Passing HSC/HSLC Higher Secondary Diploma Bachelor's degree Master's degree Any Other Experience (in years / Months) Post Held Organization Exp. I Any other relevant Qualifications /	Contact Details Email ID: Post Applied For: Certificate/ Degree Institute / University Passing Obtained / Total Marks HSC/HSLC Higher Secondary Diploma Bachelor's degree Master's degree Any Other Experience (in years / Months) Post Held Organization Exp. In Yrs/Mnt Any other relevant Qualifications /	Contact Details Email ID: Post Applied For :	Contact Details : Mob:

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Date:

Signature of the candidate