



TAGORE

INSTITUTE OF ENGINEERING AND TECHNOLOGY

DEVIYAKURICHI – 636 112. ATTUR(TK), SALEM (DT).

Recent passport size
color photograph to
be affixed

Application Form for Faculty Position

APPLICATION FOR THE POST OF _____ in _____

(Department)

SPECIALIZATION _____

1. Name in Full: _____ Gender: _____
(In Block Letters)

2. a) Father's Name: _____ Occupation: _____

b) Mother's Name: _____ Occupation: _____

3. Nationality: _____ Place of Birth : _____

Date of Birth: _____ Age: _____ Marital Status: _____

4. Category:

OC	BC	MBC	SC	ST	SCA
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Community: _____

5. Particulars of Educational Qualifications:

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

6. Title of Ph.D. Thesis with name and address of Ph.D. Guide. (Enclose Abstract of Thesis)

Degree	Title of Thesis	Guide	University	Year of Award
Ph.D.				

7. Details of Experience:

i) Teaching Experience : years

Sl. No.	Name of the organization where employed	Designation	Date of Joining	Date of leaving	Last Pay Band and Grade Pay	Service Regular/Contract
1.						
2.						
3.						
4.						

ii) Research Experience: years

Sl. No.	Name of the organization where employed	Designation	Date of Joining	Date of leaving	Last Pay Band and Grade Pay	Service Regular/Contract
1.						
2.						
3.						
4.						

iii) Industrial Experience: years

Sl. No.	Name of Industry	Designation	Date of Joining	Date of leaving	Salary Drawn	Service Regular/Contract
1.						
2.						
3.						

8. i) Total Research Publications / Presentations

Sl. No.	Nature	Published	Accepted
1.	Books		
2.	Chapters		
3.	Journals	National	
		International	
4.	Conference	National	
		International	

8. ii) Research Projects:

Sl. No.	Title of the Project	Amount in Rs.	Funding Agency	Period	Remarks (Completed/ Ongoing)
1.					
2.					
3.					
4.					

8. iii) No. of PG dissertations / Ph.D. thesis guided: P.G. Ph.D.
(Attach the titles of the Ph.Ds guided)

9. Patents

Sl. No.	Name of the patent	Year	Organisation
1.			
2.			

10. Consultancy

Sl. No.	Name of Organisation	Year	Amount (Rs.)
1.			
2.			

11. Administrative Responsibilities held

Sl. No.	Responsibility held	duration
1.		
2.		
3.		
4.		

12. (a) Minimum Pay expected:

(b) Time required to joining the Institute, if selected: _____

13. Honours / Awards / Distinctions, if any:

14. Name and addresses of tWO professional referees (who are not related to the applicant) who are in a position to testify from their personal knowledge as to the fitness of the applicant for the post applied for:

i) Name : _____

Status : _____

Address : _____

e-mail and Phone : _____ Mobile _____

ii) Name : _____

Status : _____

Address : _____

e-mail and Phone : _____ Mobile _____

Candidates shall enclose at least three reference letters (Sealed and Stamped).

15. i) Address for correspondence: _____

_____ Phone No. _____

Mobile No. _____

E-mail address: _____

ii) Permanent Address : _____

16. Any other information relevant to the Post applied for, such as:

i) Memberships/Fellowship and position of responsibility in Professional Societies:

a)

b)

c)

d)

ii) Attainments in sports and extra-curricular activities (including N.C.C.)

- a)
- b)
- c)
- d)

iii) Language fluency:

Language	Read	Write	Speak

17. Copies of documents enclosed:

- i)
- ii)
- iii)
- iv)
- v)
- vi)
- vii)

Declaration:

I hereby solemnly declare that the information furnished above is true and correct and I am responsible for the veracity of the same.

Place:

Date:

Signature of the Applicant

(TO BE USED BY THE INSTITUTE OFFICE ONLY)

Date of Receipt:

Registration No. **01/2015/**_____

Signature of the Receiving Officer