

APPLICATION FORM

Please affix a signed passport size photograph here on the first set of application form only

Application for the Post of

[To be submitted in 4 sets (one original and three xerox copies of the original along with all enclosures)]

1	Name (in Block Letters)					
2	Father's name					
3	Address for Communication					
4	Date of Birth as in SSLC Marks Card					
5	Caste					
6	Educational Qualification (Enclose Marks Card / Certificates)					
	Examination passed	Examination Body/ University	Year of Passing	Max. Marks	Marks Obtained	% Marks
	S.S.L.C or equivalent					
	Bachelor's Degree					
	Master's Degree					
	M. Phil					
	Any other					
7	Ph. D Details	Name of the awarding University			Year of award	
	Title of the thesis					
8	Pass in UGC NET / SLET	Examining Body / University			Year of Passing	
9	Details of teaching experience (Use separate sheets for furnishing details)					
	Designation	College / University	Period		Present Pay	
			From	To		

10	Research publications with Experience (Excluding the period of research for obtaining Ph. D Degree)				
11	Participation in (certificates to be enclosed)	International	National		
	(a) Conferences				
	(b) Seminars				
	(c) Workshops				
12	Presentation of research papers in (certificates to be enclosed)	International	National		
	(a) Conferences				
	(b) Seminars				
	(c) Workshops				
13	Details of administrative/technical/other experience (Use separate sheets for furnishing details)				
	Designation	Institution where working	Period		Present Pay
			From	To	
14	Nationality				
15	Languages known	To read	To write	To speak	
16	Any other information to be provided				
17	Demand Draft/ Challan details	No.:	Rs.		
		Date:			
		Name of the Bank:			

NOTE: Those who have downloaded the application from the web shall enclose a Demand Draft for Rs.100/- (Rupees one hundred only) drawn in favour of the Director, CIST, Manasagangotri, Mysore along with the application.

DECLARATION

1. I hereby declare that the information provided in this application is true to the best of my knowledge. If its is found that the information provided is false, I am liable for criminal prosecution.
2. I hereby agree to and abide by the rules and regulations of the University.

Place :

Date :

Signature of the Applicant