

## राष्ट्रीय प्रौद्योगिकी संस्थान नागालैंड NATIONAL INSTITUTE OF TECHNOLOGY NAGALAND

(An Institute of National Importance under Ministry of Education, Govt. of India)

Chumukedima,

Nagaland - 797 103

## **APPLICATION FORMAT FOR NON-TEACHING POSTS**

(Direct / Deputation Recruitment)

Affix a passport size color photograph (Self attested)

NB: Incomplete Applications, Applications without the application fees or without the signature are likely to be rejected.

a.	ADVERTISEMENT NO. & DATE:
b.	NAME OF THE POST APPLIED FOR:
	CATEGORY APPLIED FOR (TICK) (attested copy of certificate to be submitted, except for UR)  Details of fees paid and enclosed: Demand Draft/ University Challan No.
	Amount: RsBank:Branch:
1.	Name in full (in block letters):
2.	Father /Husband Name :
3.	Permanent Address (in full):
4.	PIN : Contact no
	PIN:Contact no.
5.	Aadhar Card No (please enclose a copy)
6.	Email id:
7.	Date of birth in Christian era:
8.	Age on the last date of application:
9.	Nationality:
10.	Category (SC/ST/OBC/PWD/EX-SER) (Pl. attach copy of certificate):

Exam Passed			Year of Passing		Name of the Board/University		Branch/ Specialization			Division /Class		Percentage (% CGPA / CPI		
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	Email id:					
19. Names of two referees not related to the	e applicant:					
Name:	Name:					
Dept./Designation:	Dept./Designation:					
Address:	Address:					
Pin:	Pin:					
Contact No:	Contact No:					
Email id:	Email id:					
20. Any Additional information, the candid required):	ate wishes to provide, if any (Pl. attach additional sheet, if					
21. For Internal Candidates: Have you ever	r been availed one-time Age Relaxation: Yes/No.					
<b>21.</b> 10. 1 2 2 2 2 2 2	1 0001 W.					
22. Declaration:						
in and that all the statements made in this ap	and understood the instructions and regulations referred here oplication are true and complete to the best of my knowledge authority can take appropriate action against me in case any at any stage.					
	Signature of the applicant:					
Date:	Name in full:					
Place:	Designation/ Department:					
	Address:					
23. Recommendation / Comments of the pre (For employed person of Govt. / Semi Commendation / Semi Commendation / Comments of the pre-	- ·					
Seal with Date:						

23. LIST OF ENC wherever necessary a	LOSURES: (Please attach, self attested copies of certificates, sanction orders, papers etc. and referred to)
1	6
2	7
3	8
4	9
5	10
	Signature of the applicant: