

## National Institute of Technology, Meghalaya (An Institute of National Importance under MHRD, Govt. of India) Bijni Complex, Shillong 793003, Meghalaya

## APPLICATION FORM

	For Office use		Affix latest colour
Name of the	Application No:	A	Passport size Photograph here
	Date of receipt:		(self attested)
	l l	l	
(In block CAPITA	L letters)		
. Father's/Mother's N	Name:		
Gender:	4. Date of Birth (DD/MM/YYYY):		
. Marital Status:			
. Spouse's Name:			
Pin code:			
Telephone No:			_
Telephone No:			
Telephone No: E-mail ID:  Permanent Address	S		-
Telephone No: E-mail ID:  Permanent Address  Pin code:			-

Examination	Registration		Scor	re	D. J	Qualifying		
Name	Number	Percenta	ige	Percentile	Rank	Ye	Year/Montl	
Details of acade	mic record startin	ng from SEC	CONI	DARY (Clas	s X) Examinat	ion:		
Degree/ Exam (with discipline)		Year of Passing		rcentage of Marks / CGPA	Class/Grade/		Subject Taker	
Any other fellow Please mention	vship/scholarship/	qualificatio	ns ob	tained other	than covered	in the	form? If	
a)	the details.							
b)								
	trial experience in							
	_			_				
<u>a)</u>								
a) b)								
b)								

15.	15. Details of two referees under whom the candidate has worked or studied.					
	Referee 1					
	Name: Designation: University/Institute: E-mail id:	Phone No:				
	Referee 2					
	Name: Designation: University/Institute: E-mail id:	Phone No:				
	DECLA	RATION BY THE APPLICANT	[			
	hereby certify that the information fur formation provided here is found to be in					
Da	te:		Signature of the Applicant			
Pla	ace:					