# **INDIAN INSTITUTE OF MANAGEMENT ROHTAK**

## **Application Form (For Non-Faculty Positions)**

	Position applied f	or :	
1.	Name	:	
2.	Father's/Husband's Name	:	Photo
3.	Date of Birth	:	Self Attested
4.	Male/Female	:	
5.	Whether belongs to SC/ST (If applicable attach documents)	: Yes/No If yes: SC ST	
6.	Marital Status	:	
7.	Nationality	:	

#### 8. **Educational Qualifications**

: (Secondary/Matriculation onwards. Self-Attested copies of certificates and mark sheets should be attached).

Qualification	Board/ University	Date of Commencement	Date of Passing	% Marks	Course Duration (years)

### Work Experience (Post-qualification): (Starting from the most recent) 9. (Attach self-attested copies of certificates)

Organization	Designation	Date of Commencement	Date of Leaving	Pay Scale	Gross Salary	Reasons for Leaving

#### 10. Language Proficiency: (Please tick relevant cells)

		,	
Language	Fluent in Speaking	Fluent in Reading	Fluent in Writing
English			
Hindi			

### 11. Technical Skills : (Please tick relevant cells) (Attach copies of certificates)

## A. Common for all Positions

Skill	Excellent	Good	Average	Weak	Nil
Computer Operations					
Database Applications					
10-Finger Typing					
Shorthand					
Any Other Skill:					

# B. Applicable for Financial Advisor & Chief Accounts Officer (Strike out if not applicable)

Skill	Excellent	Good	Average	Weak	Nil
Maintenance of Accounts & Finance as per					
norms of Central Government of India					
Capital Fund Management					
Disbursements					
Statutory Auditing					
Tax/Returns related Matters					
Public Grants Matters					
Revenue Generation					
Preparation of Budget Estimates					
Effective Cost Control					
Balance Sheets					
Annual Financial Statements					
Advance Accounting Comp. Applications					
Any Other:					

## 12. References:

Detail	Reference 1 (Present Employer)	Reference 2 (Previous Employer)
Name		
Designation		
Organisation		
Contact Landline		
Mobile No.		
E-mail ID		

## 13. Address:

Details	Permanent	Communication
House Name/No.		
Street/Locality		
Town/City		
District & State		
Residence Phone		
Mobile No.		
E-mail ID		

14. Do you know anyone in IIM Rohtak: Yes / No

if Yes, please give the details:

15. Details of any relative already working in IIM Rohtak:

16. Details of enclosures attached with the application:

1	2
3	4
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5	6

#### 17. **Declaration:**

I hereby declare that all the statements made in the application are true and complete to the best of my knowledge and belief. I understand that if at any point of time, any of the information is found to be false, my candidature may be cancelled/dismissed and the Institute may take any necessary action against me.

Place	:	Name :
Date	:	Signature :

Date :\_\_\_\_\_