

INDIAN INSTITUTE OF PLANTATION MANAGEMENT BENGALURU

(An Autonomous Organization of the Ministry of Commerce & Industry, Gol)

Application Form for Non-Faculty Position

A) GENERAL INFORMATION:

(Use separate forms for applying to two or more posts)

Post Applied for				
Applicant's Name (in full)				
Father's Name				
Husband's Name				
Date of Birth (DD/MM/YY)				
Gender	Male	Female		
Category (SC/ST/PWD/OBC/General)				
Marital Status and No. of Dependents				
Address for Communication with Contact Number (Phone & Mobile) & E-mail ID				
Permanent Address with Contact Number (Phone & Mobile) & E-mail ID				

B) EDUCATIONAL QUALIFICATION (beginning from highest qualification):

Degree/Examination	Subjects	Name of Institution & University/Board	Year of Passing	Marks (%)	Class/ Division

C) WORK EXPERIENCE:

SI.No.	Designation	Employer	Pay Scale	Total Emoluments	No. of Years	From	То

Photo

Total number of years of work experience post qualification: ______ years

D) ANY TECHNICAL / PROFESSIONAL QUALIFICATION AND RELEVANT EXPERIENCE (INCLUDING COMPUTER RELATED, SECRETARIAL AND/OR ADMINISTRATIVE) WITH SUPPORTING DOCUMENTS

SI. No.	Type of Experience	Experience period	Institution from which such experience obtained

E) ANY OTHER INFORMATION (e.g. MULTI-TASKS/LEADERSHIP INITIATIVES), WHICH YOU WOULD LIKE TO MENTION IN SUPPORT OF YOUR SUITABILITY FOR THE POST:

F) DECLARATION:

I declare that the information provided in my application is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If I am found to have concealed / distorted any material information, my application shall be liable to summarily rejected without any notice.

Date:

(Signature of Candidate)

Place:

(Name)

Countersigned by the Employer : ______ (with Seal & Signature) (Only for Administrative Officer position on deputation)