Application Form

For appointment to the Teaching Positions in IITM College of Law

Affix Recent Passport Size Photograph here

Name of the post applied for: _____

Discipline _____

Advertisement No._____dated _____

A. General Information:

1. Name in full (*in capital letters*): _____
2. Parentage (*in capital letters*):_____
3. Husband's Name (in case of married Women):_____
4. Date of Birth: Day Month Year

   (As recorded in the Matriculation or equivalent certificate)
5. Age (as on the last date fixed for the receipt of application) : _____
6. Marital Status: _____
7. Sex: _____-
8. Do you belong to any reserved category? _____

   If yes, specify the category (SC/ST/OBC) _____
9. Permanent Address: _____

   _____
10. Present address for Correspondence:

    _____

    _____

    Email ID _____

    Telephone No._____Mobile No. _____

B. Educational Qualifications:

Qualifications (starting from higher qualification)

Exams Passed	Year of passing	University / Board	Max. Marks	Marks Obtained	Div/Grade/ %age of marks	Subject

C. Teaching/Administrative/Technical/Research Experience:

Appointments held (in chronological order)

Designation	Name of the Organization	Scale of Pay/ Pay Structure	Nature of appointment	Period of service		
				From	To	Total Period

Note: Please attach separate sheet if the space is insufficient

D. Research & Publications

- Total Number of Journal Publications/Book Chapters: _____
- Total Number of Books: _____
- Total Number of Conference/Seminar Presentations: _____
- H-index / Citation Count (Optional): _____

Note: Please attach your CV or a separate sheet giving details of publications)

E. Additional Information

1. Whether NET/SET/SLET/Ph. D? Yes/No
   If yes, attach the relevant certificate
2. Field of Specialization: _____
3. Any other work relevant to the qualifications for the post applied for: _____
4. Have you ever been dismissed/removed/debarred from service or convicted by any court_____

DECLARATION

I hereby declare that all entries made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature/appointment is liable to be cancelled/terminated and I shall be liable for criminal prosecution.

Signature of the Applicant

Place:
Dated:

Details of Documents enclosed, duly numbered: Total number of enclosures:_____

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