**Sheela Devi Institute of Management and Technology**

To

The Chairman/Director/Principal

Name of the Institute& Address

**Subject:** Application for the Post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sir/Madam,

 With reference to your Advertisement in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ respectively for the Post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, my application may be considered for the post of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Name (according to documents** |  |
| **Father’s Name** |  |
| **Date of Birth** |  |
| **Address** |  |
| **Contact No&E.mail. ID** |  |

**Qualification:-**

**Please tick the passing exams and mandatory to fill up relevant information of the exams.**

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| --- | --- | --- | --- | --- | --- |
| Examination | Year | Marks & out of | %age | Division | Board/University |
| Matric |  |  |  |  |  |
| Sr. Sec./Diploma/10+2 |  |  |  |  |  |
| UG (B.A./B.COM/ BSC,/B,E,/B,TECH)(Honors, if any) |  |  |  |  |  |
| PG (M.A./M.C.OM/ M.SC/M.E/M.TECH |  |  |  |  |  |
| GOLD MEDAL, if any |  |  |  |  |  |
| M.Phil |  |  |  |  |  |
| Ph.D |  |  |  |  |  |
| NET/NET-JRF |  |  |  |  |  |
| Other |  |  |  |  |  |

**Experience**: Years\_\_\_\_\_\_Month \_\_\_\_\_\_Days \_\_\_\_\_\_\_ as per detail given below:-

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| --- | --- | --- | --- | --- | --- |
| Sr. No. | Name of Institution/ Organization | Post & Nature of Appointment | From with Date | To | Total |
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Research Publications etc.
1. Book Published \_\_\_\_\_\_\_\_\_

2. International Journals Published \_\_\_\_\_\_\_\_
3. National Journals Published \_\_\_\_\_\_\_\_\_\_\_

4. Paper presented in International Seminars \_\_\_\_\_\_\_

5. Paper presented in National Seminars \_\_\_\_\_\_\_\_\_

6. NCC/NSS Certificates, if any\_\_\_\_\_\_\_\_\_\_\_

7. Cultural Activities/Sports certificate, if any\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other Certificate, if any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yours Faithfully

Signature

Place\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CC: D.C.D.C., M.D. University, Rohtak**