



INDIAN INSTITUTE OF MANAGEMENT TIRUCHIRAPPALLI

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APPLICATION FORM

APPLICATION FOR THE POST OF "

"

1. Name (in CAPITAL letters)

(FULL NAME)

2. Name of Father/Guardian/Husband:

3. Date of Birth:

Age: _____

4. Nationality:

5. Gender (Male / Female / Transgender):

6. Marital Status:

7. Category:

8. Address:

Communication Address:
Email:
Telephone:
Mobile: +91

Permanent Address:
Email:
Telephone:
Mobile: +91

9. Academic Qualifications (Start with most recent educational qualification)

Name of Degree / Diploma / Certificate	School / College / Board / University	Year of Passing	Marks/Grade & Class obtained

10. Technical Skills: (Please tick relevant cells)

Skill

Computer Operations	:
Database Applications	:
10-Finger Typing – English	:
10-Finger Typing – Hindi	:
Shorthand-English (if required)	:
Any Other Skill	:

11. Computer qualifications (Please specify the details):

12. Language Proficiency: (Please tick relevant cells)

Language	Fluent in Speaking	Fluent in Reading	Fluent in Writing
English			
Hindi			
Other Language(s)			

13. Employment details (Start from your present/most recent job):

Organization & Location	Position Held	Job Profile – Major Responsibilities	Date of Joining	Date of Leaving	Reasons for leaving	Grade Pay if applicable	Salary Drawn per month (Rs.)

Total experience: _____ Years _____ Months

14. Major Achievements during the Career:

15. Write statement in support of application. Please state why you are suitable for the post applied.
(Not more than 300 words)

16. Details of Training Programmes attended:

17. Membership in Professional and Technical Bodies:

18. Any other information that you would like to share:

19. References:

(Please give names of three referees with address, email id and contact numbers whom the Institute can write/call for referencing.)

DECLARATION

I hereby declare that the particulars furnished above by me are true and complete to the best of my knowledge and belief. I understand that if any particulars found to be false at a later date, my candidature shall be liable to be cancelled without assigning any reason.

Place:

Date:

SIGNATURE OF THE APPLICANT

Note:

If your system does not have adobe acrobat pro then, you should convert your image (photograph & signature) to PDF format. To convert the image into PDF format, please follow the below instructions:

- 1.Open your Photograph.
- 2.Go to 'File'->Click on 'Print' then select printer "Adobe PDF" or "Microsoft print to PDF".
- 3.Click "Print" button.
- 4.Select Location for saving the PDF file.
- 5.The converted PDF file will be saved in the selected location.