

Regn./Roll No. _____
(for office use)



भारतीय प्रौद्योगिकी संस्थान दिल्ली Indian Institute of Technology Delhi

Hauz Khas, New Delhi – 110 016.

Tel: (011) 2659-1488

Website : www.iitd.ac.in

APPLICATION FORM FOR NON-ACADEMICS POSTS (To be filled in candidate's own handwriting)

I. Name of the post applied for **Consultant (Student Counsellor)**

II. Department / Centre: **Counselling Services**

III. Advt. No. **Advt. No. E-II/11/2023(W) Dated September 06, 2023**

Affix latest
passport size
photograph

1. Name of the candidate _____
(FULL NAME IN BLOCK LETTERS)

2. Address (IN BLOCK LETTERS) (i) For Communication (ii) Permanent

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Telephone/Mobile No. _____

E-mail Address _____

3. Particulars of age (as per matriculation or equivalent Certificate) (i) Date of Birth _____
(ii) Age (on last date of receipt of application) _____ years _____ Months _____ Days
(iii) Place of Birth _____ Nationality _____

4. Father's /Husband's Name: _____
(i) Father's /Husband's Occupation: _____
(ii) Father's / Husband's Annual Income: _____

5. Particulars of Qualification and Experience:

If space is insufficient, separate sheet can be used. Attested copies of certificates and testimonials in support of the qualifications and experience mentioned should invariably be attached, failing which application is liable to rejection.

(i) Qualifications

| Academics/Technical/Professional Exams passed with specification / subject (Higher to lower) | Grade / Divn. | % of marks obtained | Year of passing | Name of the University / Board |
|--|---------------|---------------------|-----------------|--------------------------------|
| | | | | |

(ii) Experience

| Name of the employer / Organisation (reverse chronological order) | Designation | Dates | | Length | | Nature of duties / area of specialization etc. | Pay & Pay Scale/ Grade Pay/ Pay level of Pay Matrix- 7 th CPC (Rs.) |
|---|-------------|-------|----|--------|--------|--|--|
| | | From | To | Years | Months | | |
| | | | | | | | |

6. Tentative date of joining in case of selection _____



I hereby declare that the entries in this form and additional particulars (if any) furnished in connection with the application are correct and true to the best of my knowledge & belief and nothing has been concealed therein.

Signature of Candidate

Place _____

Date _____

Encls: _____ (Enclose the list)
