

DEFENCE INSTITUTE OF ADVANCED TECHNOLOGY
(DEEMED UNIVERSITY), GIRINAGAR, PUNE-411025
(An Autonomous Organisation fully funded by Department of
Defence Research & Development, Ministry of Defence)
(Only Indian Nationals to Apply)

PASTE HERE A
SIGNED COPY OF
YOUR RECENT
PASS-PORT SIZE
PHOTOGRAPH

Advt. No:02/2013(NTS-DIAT (DU))

Name of the post applied for

Mode of Recruitment (Direct Recruitment / Deputation)

Demand Draft No. Date

for Rs., Bank.....

payable at branch, Pune.

GENERAL INFORMATION :

1. Name in Full :

2. Father's/Husband's Name :

3. Date of Birth: Day.....Month.....Year..... 4. Age YearsMonths
(DOB as recorded in Matriculation or equivalent certificate & age as on the last date fixed for the receipt of application)

5. Nationality : 6. Marital Status : Married / Unmarried (Tick '√' Mark)

7. Sex : Male / Female (Tick '√' Mark)

8. Do you belong to Scheduled Caste (SC) or Scheduled Tribe (ST) or Other Backward Class (OBC) (Non-Creamy layer) or Differently Able (PH) ? If Yes, specify.....

9. PERMANENT ADDRESS :

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10. ADDRESS FOR CORRESPONDENCE :

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.....
.....

Email :

Land-line Ph. : Mobile

11. EDUCATIONAL QUALIFICATIONS (*) (from Matriculation onwards):

Examination	Board / University	Year of Passing	Marks		% of Marks	Subject's/ Course
			Obtained	Out of		
Matriculation (10 th)						
Higher Secondary / Intermediate (10+2)						
Bachelor's Degree						
Master's Degree						
M. Phil.						
Ph. D.						
Any other Degree/Diploma						
Technical Qualifications (if any)						

(Note : (*) Please attach separate sheet if the space is insufficient)

12. ADMINISTRATIVE/TEACHING/TECHNICAL/PROFESSIONAL EXPERIENCE (Starting from the latest): (*)

(a) Experience in Govt./ Semi govt./PSU/Autonomous bodies/ Universities/Other:

Designation	Name of the Organization	Scale of Pay / Pay Structure/Pay in Pay Band + GP/AGP #	Nature of Appointment	Period of Service		
				From	To	Period

Total : YearsMonths

(b) Experience in Private Companies/ Pvt. Universities/ Pvt. Organizations:

Designation	Name of the Organization	Scale of Pay / Pay Structure/Pay in Pay Band + GP/AGP #	Nature of Appointment	Period of Service		
				From	To	Period

Total : YearsMonths

(Note : (*) Please attach separate sheet if the space is insufficient)

(Note : # Please indicate Pay Band and Grade Pay separately)

13. ADDITIONAL INFORMATION, IF ANY:

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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. I have enclosed attested copies of the supporting documents in respect of Sr. No. 3, 8, 11 ,12 and 13 above.

Place.....

Date.....

Signature -----

NAME IN BLOCK LETTERS -----

(Encl : As above)

(The endorsement below is to be signed and forwarded by the Head of the Department/Employer in the case of the in-service candidates whether in permanent or temporary capacity failing which the application is liable to be rejected).

.....

ENDORSEMENT OF THE EMPLOYER

Ref. No.....
Date.....

1. The application of _____ is hereby forwarded with the remarks that we have no objection to his/her application being considered.
2. Certified that the information given by the applicant in this application form has been checked/verified and found to be correct with reference to his/her service records.
3. Applicable in case of deputation: Attested copies of the applicant's confidential reports for the preceding five years alongwith vigilance/integrity certificates are enclosed.

Signature
of the forwarding Officer
(with office seal)

CHECK LIST

- | | | | | | | |
|----|---|---|-----|--------------------------|----|--------------------------|
| 1. | Have you signed the Application ?
(Tick ✓ Yes or No) | : | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 2. | Have you attached the Attested Copies of all the
Certificates/Testimonials ?
(Tick ✓ Yes or No) | : | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 3. | Have you enclosed proof of Age ?
(Tick ✓ Yes or No) | : | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 4. | Have you enclosed requisite Demand Draft ?
(Tick ✓ Yes or No) | : | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 5. | Have you enclosed Attested Copy of
SC/ST/OBC/P.H.P. Certificate ?
(Tick ✓ Yes or No) | : | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| 6. | Have you filled up the application form in your
Own handwriting ?
(Tick ✓ Yes or No) | : | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |