

GHARDA FOUNDATION'S
GHARDA INSTITUTE OF TECHNOLOGY,
AT & POST, LAVEL. TAL.KHED, DIST.RATNAIRI.
PIN. 415 708, MAHARSHTRA, INDIA.
Tel. No.: 91 – 2356 – 262 795
Website: www.git-india.com
Email: facultyrecruitment@git-india.com

For Office Use Only:

Department:

Application No.:

Position:

Status: Accepted / Hold / Rejected

(Registrar):

APPLICATION FOR FACULTY POSITION

Last date for receipt of completed Application Form :

Date :

Bank :



1.Name of the Post applied for:

Department:

Specialization:

Name of the Candidate (in block letters):

(a) Permanent Postal Address in full:

(b) Address for communication:

(c) Phone with STD code :

(d) Mobile:

(e) Email:

4. Date of Birth (Certificate to be enclosed) :

5. (a) Nationality : Indian/

(b) Sex : M/F

(c) Marital Status: Married/Unmarried

(d) Whether belongs to S.C/S.T/B.C. : Yes/No

(e) Specify category:

(e) Religion :

6. (a) Name and address of Parent/Guardian

(b) Parent's / Guardian's Occupation :

7. (a) Mother Tongue :

(b) Languages known with proficiency in reading and writing:

8. Academic Career:

• Give particulars of all examinations passed (Starting from SSC). Attested copies of all Certificates, should be attached.

Exam Passed	Subject/ Branch/ Specialization	Institution in Which studied	Name of the University / Board	Year of Passing	Class or Division and Percentage of Marks

(Use separate sheet if necessary)

9. Research and/or industrial Experience:

(a) Details of Research work done giving list of Research publications with dates and names of journals in which published.

(Attach Separate sheet if required)

(b)Particulars of Research work supervised

Number of scholars registered for Ph. D.

under your guidance :

Number of scholars awarded Ph.D. Degree :

(c) Rewards or Awards received

10.(a) Give in chronological order details of your employment, starting with latest.

Full address of the institution where served	Nature of work	Post held and scale of pay	Whether held permanently / on probation / temporarily	Period		Last basic pay drawn (Excluding Allowances)
From	To					

(Use separate sheet if necessary)

- Teaching Experience :
- Under-graduate :
- Post-graduate :

12. Names and addresses with email ids & Phone numbers of two persons to whom reference may be made

(1)

(2)

DECLARATION FORM

13. I declare that all the statements made in this application are true to the best of my knowledge and belief.

Place:

Date:

Signature of the Applicant