RUSTAMJI INSTITUTE OF TECHNOLOGY

BSF Academy, Tekanpur, Gwalior – 475 005 (M.P.) Tel.: - (07524) 274320 e mail: rjit_bsft@yahoo.com

APPLICATION FORM FOR LAB INSTRUCTOR ON CONTRACTUAL BASIS

(To be filled up by the Candidate in his/her own handwriting)

	Deptt. For which applied:	Adv. No. 04/2025
l.	Full Name : (In English Block letters)	
2.	Father's/Husband Name:	Recent Passport Size Photograph
3.	Date of Birth D D M M Y Y	YY
	Aadhaar No.	
.	PAN No.	
	Marital Status (M/S/W/D) :	
•	Address for Correspondence :	
	Contact No. (Mobile No.)	
0.	E-Mail :	

certificates, mark sheets should be enclosed in chronological order)

S. No.	Degree/ Certificate	Discipline Subject	University/Board whether approved by AICTE	Passing Year	Division with %	Encl No.
I	II	III	IV	V	VI	VII

11. (A) Teaching Experience: (Lab Instructor Level)

S. No.	Name of the Institute	Post held	Pay Scale	Pay drawn	From	То	Encl No.
I	II	III	IV	V	VI	VII	VIII

(B) Industrial Experience

S.	Name of the	Post held	Pay Scale	Pay	From	To	Encl
No.	Industry/Org.			drawn			No.
Ι	II	III	IV	${f V}$	VI	VII	VIII

10.	Name	Address	R _z	Contact No.	of the two	references
IV.	Name.	Audiess	X.	COHLACL NO.	. OI THE LW) references

(a)	
(b)	

DECLARATION

I declare that the entries made in this application form, from (1) to (10) are true and correct to the best of my knowledge and belief.

Date:	
Place:	(Signature of the Candidate)

RUSTAMJI INSTITUTE OF TECHNOLOGY

BSF Academy, Tekanpur, Gwalior – 475 005 (M.P.) Tel.:- (07524) 274319, Fax (07524) 274320 e mail: rjit_bsft@yahoo.com

APPLICATION FORM FOR THE POST OF ASSISTANT PROFESSOR ON

CONTRACTUAL BASIS
(To be filled up by the Candidate in his/her own handwriting)

]	Deptt. For which appli	ed :										/2025
1.	Full Name (In English Block le	•								ecent	Passpo	ort
2.	Father's/Husband								Si		i asspi iotogra	
3.	Date of Birth	D D	M	M	Y	Y	Y	Y				
4.	Aadhaar No.											
5.	PAN No.											
6.	Marital Status (M/S	S/W/D)	:									
7.	Address for Corres	pondence	:									
8.	Contact No. (Mobi	le No.)										
9.	E-Mail	20 2 (00)										
10. (Pleas	Academic Qualificate mention details fro icates, mark sheets sh	m Matric/H								tteste	ed copi	es of
S. No.	Degree/ Certificate	Discipline Subject		ether	sity/B appi	ove		Pass Ye	_		rision ch %	Encl No.
I	II	III			IV			7	7	1	VI	VII
1		111			IV				/		V1	V

1	1	For	Ph	D

Topic	Discipline	Name of University/ Institute	Year of Award	Encl No.

12 (A) Teaching Experience: (Assistant Professor Level)

` ,	0 1	`		,			
S.	Name of the	Post held	Pay Scale	Pay	From	To	Encl
No.	Institute			drawn			No.
I	II	III	IV	V	VI	VII	VIII

(B) Industrial Experience

(-)	reserve zerperren						
S.	Name of the	Post held	Pay Scale	Pay	From	To	Encl
No.	Industry/Org.			drawn			No.
I	II	III	IV	V	VI	VII	VIII

- 13. Additional Information of Academic/Professional Activities
- i. Number of Papers published in International (I)
 And National (N) Journals (Attach list separately,
 With Title, Name of Journal, Vol. & Year etc)

(I)	+(N	() =	=
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ii. Number of Papers Published in International (I) and National (N) Conferences (Attach list separately, with Title, Name of Conference, Vol. & Year etc. (I) _____ + (N) ____ =

14.	Name.	Address	&	Contact No.	of the	two	references
IT.	1 value,	Auulcss	u	Comtact 110.	or the		I CICI CHCC

U. UI	inc two references
(i)	
(ii)	

DECLARATION

	I declare	that the entrie	s made in this	s application	form,	from (1) to (14	l) are true	and c	orrect
to the	best of my	knowledge ar	nd belief.						

Date :	
Place :	(Signature of the Candidate)