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|  | **NATIONAL INSTITUTE OF TECHNOLOGY, ARUNACHAL PRADESH**  **(Established by MHRD, Govt. of India)**  **YUPIA, ARUNACHAL PRADESH -791112, INDIA** | |
| **Dr. Prases Kumar Mohanty**  **DIC( R & D)** | | Website : www.nitap.ac.in  E-Mail : deanrnd@nitap.ac.in  Fax No. : 0360- 2284972  Phone No.:9485236260 |

**ADVERTISEMENTNO: DATED:**

**Application form for SRF Department of Biotechnology at NIT Arunachal Pradesh**

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| Affix your recent color passport size photograph |

1. Name of the Post :
2. Name (in block letters):
3. Date of Birth:

4. Gender: M/F

5. Marital Status:

1. Father’s Name:
2. Mother’s Name:
3. Cast: GEN/OBC/SC/ST
4. Nationality:
5. Mobile No.:
6. Email id:
7. Address for Correspondence:
8. Parent’s Contact No: (a) Mobile/Telephone No:

(b) Email-id:

1. Particulars of Academic Career Class – XII onwards (***self-attested copies of all mark-sheets and certificates should be attached along with the application form***):

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| Sl. No. | Name of Examination | Year of Passing | Institute/University | Division | % of marks (If CGPA convert to %) |
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1. GATE score with year:

**Self-declaration Certificate**

I am not pursuing any course of study at any other university/institute in India or abroad at present. Particulars given above are true and correct to the best of my knowledge and belief. If any information furnished by me, found false at any point of time during the tenure of course my registration will be treated as cancel. I shall be abided by the rules and regulations of the NIT Arunachal Pradesh.

Date:

Place: (Full Signature of the Applicant)