



ARMY INSTITUTE OF TECHNOLOGY (AIT)

Dighi Hills, Pune 411015

Recognised by AICTE, DTE, Government of Maharashtra and affiliated with Savitribai Phule Pune University, Pune ID No. PU/PN/ENGG/108/1994

Application Form (for non-teaching posts)

To
The Principal
Army Institute of Technology
Dighi Hills
Pune 411 015.

Paste your
photo here

Sir,

I wish to apply for a position in your organization. The relevant details are as follows:

1. POST APPLIED FOR:

1.1 NAME OF THE COLLEGE/INSTITUTE:

2. PERSONAL INFORMATION:

2.1 Full name:

.....
(in CAPITAL letters) (First name) (Middle Name) (Surname)

Name as per PAN Card only.

2.2 Address for correspondence:

.....
.....

2.3 Permanent address:

.....
.....

2.4 Telephone: STD code: **Phone:**

2.5 Cell (Mobile) Phone No. :

2.6 E-mail address:

2.7 Date of Birth: /...../ **Age:**

2.8 Marital Status:.....

2.9 Category..... Religion..... Caste..... Sub-Caste.....

3 ACADEMIC QUALIFICATIONS: (In reverse order from higher qualification up to S.S.C.)

| Sr. No. | Examination / Degree | Year of passing | Principal / Special subject/s | School / College / Institute | Board / University | Class / Grade | % of marks |
|---------|----------------------|-----------------|-------------------------------|------------------------------|--------------------|---------------|------------|
| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
| | | | | | | | |
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4 WORK EXPERIENCE: (In reverse order starting with current employment)

| Sr. No. | Post | Period | | Organization / Management | Last salary drawn |
|---------|------|--------|-----|---------------------------|-------------------|
| | | From | To | | |
| (1) | (2) | (3) | (4) | (5) | (6) |
| | | | | | |
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5 LANGUAGES KNOWN

| Language | Read | Speak | Write |
|----------|------|-------|-------|
| | | | |
| | | | |
| | | | |
| | | | |

6 EXTRA –CURRICULAR ACTIVITIES / HOBBIES

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.....

.....

7 SPECIAL ACHIEVEMENTS

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8 ANY OTHER INFORMATION

.....

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.....

9 REFERENCES :

(1)

(2)

I hereby certify that the information given in this application is true and correct to the best of my knowledge and belief. I understand and agree that misrepresentation or omission of relevant facts will justify cancellation of application.

Date :.....

Place :.....

(Signature of the Applicant)