



ICFAI University Mizoram

Durtlang North, Aizawl, Mizoram -796025
Email : aizawl@iumizoram.edu.in Website: www.iumizoram.edu.in

Application Form for Teaching Post

Post Applied For :.....

Department :.....

I (Information)		CANDIDATE
Name (In block letters)		
Address		
Email		Attach your passport size photo here
Mobile		
Date of Birth		
Sex		
Category (SC/ST/OBC)		

II		Academic Qualifications		
Sl. No	Description	Institution	Year of Passing	Aggregate Marks %
	Class X			
	Class XII			
	Graduation			
	Post Graduation			
	Ph.D.			
	Other Qualifications (if any)			

III		Qualification in NET/SLET/SET or equivalent test / exam	
Sl. No	Test / Exam	Year of Qualification	

IV. Whether Person with Disability	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Category		

V Work Experience					
Institution / Organization with Address	Period of Service		Total No. of years	Basic Pay	Designation / Nature of Work
	From	To			

Note: All Particulars should be supported by relevant documents

VI List of Enclosures

VII	List of Publications, Presentations and Contributions (To be enclosed in separate sheets)
1	i) List of Publications. ii) List of Presentations iii) Any other relevant contributions.
2	Notable Contributions:(e-content/internship supervision/start-ups/innovation/consultancy etc.)

Declaration

I certify that the information presented in this employment application form and other application material is accurate, complete and honestly presented. I understand and agree that any inaccurate information, misleading information or omission will be caused for the rescission of any offer of employment or for disciplinary action or dismissal if discovered at a later date. I agree to abide by ICFAI Code of Ethics in letter and spirit.

I agree to abide by the Rules and Regulations covering the employment with ICFAI. I clearly understand that the jurisdiction for all the disputes is Hyderabad, India.

Place:

Signature of the Applicant

Date:

Name: _____

FOR OFFICE USE ONLY

<input type="checkbox"/>	Selected	<input type="checkbox"/>	Rejected
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SIGNATURE AND NAME OF THE SELECTION COMMITTEE MEMBERS

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