



Estd. 1999

**MCKV INSTITUTE OF ENGINEERING**  
 A NAAC Accredited "A" Grade Autonomous Institute under UGC Act 1956  
 Approved by AICTE & affiliated to Maulana Abul Kalam Azad University of Technology, W.B.  
 243 G.T. Road (N), Liluah, Howrah- 711204, West Bengal, India

Adv. No.

**Application form**

Date:

**Post Applied for:****Department/ Discipline:**For Office Use

(i) Serial No :

(ii) Date of Receipt:

Signature of the Scrutiny Committee:

(iii) Date of scrutiny:

Paste a recent passport-size photograph

|    |   |                             |                |   |   |                 |                                 |
|----|---|-----------------------------|----------------|---|---|-----------------|---------------------------------|
| 1. | Name in Full<br>(In Block Letters)  |                             |                |   | Date of Birth<br>(dd/mm/year)                       | Age             | Blood Group                     |
|    |   |                             |                |   |   |                 |                                 |
| 2. | Religion  | Nationality                 | Marital Status | No. of Children (if any) and Occupation | Any history of Major Illness or Physical Disability |                 |                                 |
|    |   |                             |                |   |   |                 |                                 |
|    | Do any of your relative is/was a student /employee of MCKVIE ? (Yes/No) If yes, provide details |                             |                |   |   |                 |                                 |
|    |   |                             |                |   |   |                 |                                 |
|    |   |                             |                |   |   |                 |                                 |
|    |   |                             |                |   |   |                 |                                 |
| 3. | Present Employment with Salary Details  |                             |                |   |   |                 |                                 |
|    | Institute/Organization  | Designation                 |                | Nature of Work                          | Pay Band  | Grade Pay       | Total Salary (Per month) in Rs. |
|    |   |                             |                |   |   |                 |                                 |
| 4. | Address for Correspondence  |                             |                |   |   |                 |                                 |
|    | Mobile Number   |                             |                |   |   |                 |                                 |
|    | PAN Card/ Aadhar No.:   |                             |                | Email id:                               |   |                 |                                 |
| 5. | Permanent Address   |                             |                |   |   |                 |                                 |
| 6. | Educational Qualifications (Please add more rows if needed)                                     |                             |                |   |   |                 |                                 |
|    | Sl. No.   | Degree Obtained             | Discipline     | Name of the School/College/ Institute   | Name of Board/ University                           | Year of Passing | % of Marks/ CGPA                |
|    | (i)   | M.Tech/MS/M.Sc./ MA/MBA/MCA |                |   |   |                 |                                 |
|    | (ii)  | BA/B.Sc./B. Tech.           |                |   |   |                 |                                 |
|    | (iii)   | XII Class                   |                |   |   |                 |                                 |
|    | (iv)  | X Class                     |                |   |   |                 |                                 |
|    | (v)   | Other, if any               |                |   |   |                 |                                 |
|    | Qualified for (mention year) if any :   |                             | NET            | SLET/SET                                |   | GATE            | None                            |
|    |   |                             |                |   |   |                 |                                 |

|  |  |              |              |           |             |                |           |
|--|--|--------------|--------------|-----------|-------------|----------------|-----------|
| 7.   | <b>Particulars of experience in reverse chronological order (starting from present employment)</b>             |              |              |           |             |                |           |
|  | Industry/Organization  | Start Date   | End Date     | Duration  | Designation | Nature of work | Pay Scale |
|  |  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
| <b>Total experience (in Years):</b>  |  |              |              |           |             |                |           |
| 8.   | <b>Any other details relevant to the post applied :</b>  |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
| 9.   | <b>Mention notice period needed for joining if offered a post</b>  |              |              |           |             |                |           |
| 10.  | <b>Name two referees with complete contact details including Affiliation, Address, Ph no., &amp; email ID.</b> |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
| 11.  | <b>EXTRA-CURRICULAR ACTIVITIES:</b>  |              |              |           |             |                |           |
| 12.  | <b>LANGUAGE KNOWN:</b>   |              |              |           |             |                |           |
|  | Speak, Read & Write  | Speak & Read | Read & Write | Read Only | Speak Only  |                |           |
| 13.  | <b>OTHER DATA :</b>  |              |              |           |             |                |           |
| A)   | Why do you desire a Change from your present position  |              |              |           |             |                |           |
| B)   | How much minimum Gross Salary is acceptable to you if selected   |              |              |           |             |                |           |
| 14.  | <b>IF YOU HAVE BEEN INVOLVED IN ANY COURT PROCEEDINGS, GIVE PARTICULARS:</b>                                   |              |              |           |             |                |           |
|  |  |              |              |           |             |                |           |
| 15.  | <b>List of Enclosures:</b>   |              |              |           |             |                |           |
| ANNEXURE I - Age proof   |  |              |              |           |             |                |           |
| ANNEXURE II - Proof of the last salary drawn   |  |              |              |           |             |                |           |
| ANNEXURE III- Certificates and mark sheets (from class X to highest qualification)   |  |              |              |           |             |                |           |
| ANNEXURE IV- Documents related to work experiences   |  |              |              |           |             |                |           |
| ANNEXURE V- All other testimonials   |  |              |              |           |             |                |           |
| <b>DECLARATION</b>   |  |              |              |           |             |                |           |
| I hereby, solemnly declare that the information furnished in this application are true and correct to the best of my knowledge and belief. If at any time I am found to have concealed/ suppressed any material/ information or given any false details, my appointment shall be liable to be summarily terminated without notice or compensation. |  |              |              |           |             |                |           |
| Place:   |  |              |              |           |             |                |           |
| Date:  | <b>Signature of the Applicant</b>  |              |              |           |             |                |           |