

CHAITANYA BHARATHI INSTITUTE OF TECHNOLOGY (Autonomous)

(8 U.G. & 3 P.G. Engg., Programmes Accredited by NBA & Accredited by UGC - NAAC - with "A" Grade and NIRF Ranked Institute)

Chaitanya Bharathi P.O., Kokapet (V), Gandipet (M), Hyderabad - 500 075, Telangana State.

Adv	vt. No. 2 / TS / 2020 <u>EMPLOYM</u>	ENT APPLICATION FORM	Affix your latest
	PLICATION FOR THE POST OF	:	passport size photograph & get it attested by a Gazetted Officer with seal
DE	PARTMENT	:	
1.	Name in full with Surname	:	
2.	Father's / Husband Name	:	
3.	Date of Birth & Age (in Christian era)	:	
4.	Place of Birth	:	
5.	Postal Address for Communication	:	
6.	Email ID	:	
7.	Mobile No.	:	
8.	State whether you belong to OC/SC/ST/E (Attach a Certificate from the Authority p	C/PH: rescribed under Government Rules)	_
9.		passed Degree / Diploma obtained (comm n). Where a Degree / Diploma has been obtained	

9.	Give particulars of all Examinations passed Degree / Diploma obtained (commencing with the
	Matriculation or equivalent Examination). Where a Degree / Diploma has been obtained by Private
	appearances that should be specifically mentioned in Brackets in Column (2) of the Table.
	(Capies of Cartificates to be analoged)

- (Copies of Certificates to be enclosed)

S. No.	Examination or Degree	Name of the College and University	Year of passing	Class & Percentage	Subjects taken for Specialization

		- (Cop	oies of Appoint	ment Orde	ers and S	ervice (Certificates to be	enclosed	
S.	Name & Address of	e & Address of	Scale of pay /		ration of ploymen		Basic Pay last Drawn /	Reasons for	
No.	the Organization	Designation	Consoli- dated Salary Rs.	From	То	Total (Yrs) Consolidated salary		leaving the Post	
1.									
2.									
Cour	ses taught:					<u> </u>			
1	a) Administrativa Evra	w i awaa.	Vra (Ci.		a almana	اممنمها	and an		
L	o) Administrative Expe					Ü	oraer) E ertificates to b e	enclosed	
C N	o Organiza				on of Em	ployme	nt Pay Band	l / Grade	
S. N	o. Organiza	uon	Designation	Fro	om	То	Pay and Total Salary in Hand		
1.									
1. 2.									
	c) Industrial / Researce	ch Experience	: Y	rs. (Give i	in reverse	e chrono	ological order)		
	c) Industrial / Research	-		· ·			ological order) C ertificates to be	e enclosed,	
2.	c) Industrial / Researc	- (Сор	ies of Appoint	ment Orde	ers and S uration o	ervice (Certificates to be Basic Pay	Reasons	
	c) Industrial / Research	-		ment Orde	ers and S ration o	f f	Certificates to be	Reasons for	
2. S.		- (Cop	oies of Appoint Nature of	ment Orde	ers and S uration o	ervice (Certificates to be Basic Pay last Drawn /	Reasons for	
2. S.		- (Cop	oies of Appoint Nature of	ment Orde Du En	ers and S ration o	f f nt Total	Basic Pay last Drawn / Consolidated	Reasons for leaving	

S. No.	Name	Title of Thesis	Year of Completion	Co-guides (if any)
1.				
2.				
3.				
4.				

12. **RESEARCH:**

a)	Paper	Publication	in Referee	d Journal -	- list those	published	and acce	pted se	parately	V)

- (List of Publication details to be enclosed)

Sl. No.	Name of Refereed Journal	National / International	Title of the Paper	Year of Publication
1.				
2.				

b) Paper accepted, presented & published in Conference Proceeding (Scopus Id and H Index should be mentioned)

- (List of Conference Proceeding details to be enclosed)

Sl. No.	Name of Refereed Journal	National / International	Title of the Paper	Year of Publication
1.				
2.				

c) Books / Chapter Published:

S. No.	Name of the Book	Name of the Publisher	ISBN No.	Year of Publication
1.				
2.				

d) Details of Research Grants / Consultancy:

S. No.	Name of the Granting Agency	Title	Sanctioned Amount Rs.	Sanctioned Date & Duration	Status
1.					
2.					

e) Sponsored Projects:

S. No.	Title of Project	Sponsoring Agency	Amount of grant	Period	PI or Co PI	Status
1.						
2.						

13.	Membership of Professional Boo	lies:
14.	Awards / Recognitions, if any (For more use separate sheet)	:
15.	Other Information, if any	:

16.	Details of Enclosures:		
	(i)	(ii)	
	(iii)	(iv)	
	(v)	(vi)	
17.	If any of your Relatives / Friends are working in the Institute mention their Names with Relationship.	ne :	
18.	Names of two Persons with their Address / Design (Including Email ID & Mobile Number) to whom can be made about the Candidate		
	i)		
	ii)		
	If selected and appointed please specify the time y	ou require for joining duty:	
Place: Date:		Signature of the Candidate	
===	DECLARATION TO BE CL		
	·	GNED BY THE CANDIDATE	
I he	reby declare that the particulars furnished in this Ap	oplication are true to the best of my knowledge.	
Dat	e:	Signature of the Candidate	
===	ONLY FOR CANDIDATES ALREADY WOR	RKING IN ORGANIZATION / INSTITUTIONS	
	Forwarded to the Principal, CBIT, Gandipet, Hyder The Applicant is a Permanent / Temporary Employ		
c. Certified that the above Particulars are correct as per our Records.d. The Organization / Institution has No Objection to relieve Him / Her, if He / She is see			
		EIILI SICNATUDE.	
Dat	e:	FULL SIGNATURE: DESIGNATION: (Office Seal)	