



इन्दिरा गांधी राष्ट्रीय जनजातीय विश्वविद्यालय

(संसद के अधिनियम के अधीन स्थापित केन्द्रीय विश्वविद्यालय)

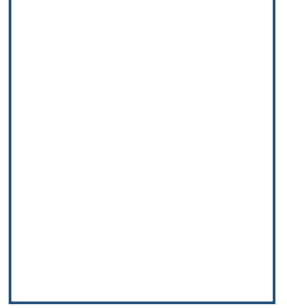
INDIRA GANDHI NATIONAL TRIBAL UNIVERSITY

(A Central University established by an Act of Parliament)

AMARKANTAK, MADHYA PRADESH – 484 887 INDIA

Tel.:07629-280801, 280802 ♦ Fax: 07629- 269432 ♦ website: www.igntu.ac.in

MeitY, Govt. of India Project APPLICATION FORM



1. Name of the Post:

First Name

Last Name

2. Name:

3. Mother's Name:

4. Father's Name:

Day

Month

Year

5. Date of Birth:

6. Sex:

Male:

Female:

Other:

7. Address:

Street Address:

City:

State/ Province:

Postal/ Zip code:

Country:

INDIA

8. Category:

ST:

SC:

OBC:

UR:

9. Mobile No.:

10. Whats App No.:

11. Aadhar No.:

12. E-mail ID:

13. Qualification:

10 th		12 th	
UG:		PG:	
Other:			

14. Any other Experience:

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15. Why do you think you are the best candidate for this position? Justify it in 100 hundred words technically.

16. Why do you want to work in this project? How will you complete the job responsibilities in the target time as per the position you are applying for? What is your plan for this? What would a great performance in this role look like? Describe your plan in 500 words.

17. Briefly outline your relevant skills and experience and tell what can be the advantage of your previous work experience for the related position? What can you do for the project that other candidates can't? describe it in 250 words.

18. Give the contact: name, designation, address, email and mobile number of at least 10 subject experts who know you from any social-educational-industrial field.

Enclosed: Photocopy of Aadhar card, educational certificates (10th , 12th , UG onwards), Experience Certificate and other relevant documents.

Declaration by the candidate:

I have carefully read all the instructions for filling up the application form. I, solemnly declare that the forgoing information in the application form is complete, correct & true to the best of my knowledge and belief. I also certify that I am liable for disciplinary action by the University if any information given is found false/ incorrect.

Date:

Place:

Signature of Candidate

(Fill and submit on this mail: prof.vikash@icloud.com)