

# APPLICATION FORMAT

For the Post of Teaching Associate

at Institute of Hotel Management Catering Technology & Applied Nutrition, Gwalior

Post Applied For \_\_\_\_\_

1	Name of the candidates (In Capital Letters)				A recent Passport Sized Colored photograph to be pasted here and Signed Across	
2	Date of Birth	Day	Month	Year		Age as on 01-07-2023
3	Father's Name/Husband's Name					
4	Nationality					
5	Gender(Male/Female)					
6	Marital Status	Married		Single		
7	Category (Please tick in appropriate Box)	Gen	SC	ST	OBC	
8	Address Pin Code	Correspondence		Permanent		
9	Tel.No.					
10	Mobile No.					
11	E-mail Id.					
12	Aadhar No.					
13	Bank account details with IFSC code					

14	Educational Qualification( As ascending Order) ( All Testimonials to be attached			
Sl.No	Name of the Exam passed	Name of the Board/NCHMCT/IGN OU/SBTE/University	Year of Passing	% of Marks up to tow decimals
a)	10 <sup>th</sup>			
b)	12 <sup>th</sup>			
c)	Graduation( Please specify Stream)			
d)	Full Time Bachelor's Degree in Hospitality & Hotel Administration/Hotel Management			
e)	Full Time Master's Degree in Hospitality & Hotel Administration/Hotel Management			
f)	Ph.D.			
g)	Any other relevant			

- Strike off which is not necessary

15	NHTET details				Date of Exam	
	Roll No		Qualified/Note qualified		Qualification date	Remarks
	Paper No	Max. marks	Mark obtained	% age of marks		
	I					
	II					
	III					

16	Work Experience ( In chronological order beginning from the present job ) :				
Sl.No	Designation & Pay Scale	Organization	Period of service		Reason for leaving the job
			From	To	

17. Present post with scale of pay & pay drawn : \_\_\_\_\_

18. Disclosure about past disciplinary proceedings. If any \_\_\_\_\_  
 \_\_\_\_\_ (Add additional Sheets if required)

19. Details regarding legal detention/conviction if any: \_\_\_\_\_  
 \_\_\_\_\_ (Add additional sheets if required)

20. Any other information desired to be furnished ; \_\_\_\_\_  
 \_\_\_\_\_ (Signature of applicant)

Date :

Place :

Declaration :-

I hereby declared that all the particulars furnished by me in this application are true to the best of my knowledge and belief. If any of the information/particulars furnished by me is found to be false at any stage, I am aware that my candidature/selection is liable to be rejected/cancelled by the appropriate authority without assigning any reason.

Date : \_\_\_\_\_ ( Signature of the applicant )

Place: \_\_\_\_\_ Name \_\_\_\_\_

Note (i) Please use additional sheets for item No 14 and 16 if required .

(ii) The application form without enclosure of self certified supporting document/testimonials as Mentioned above shall be liable to be treated as invalid