

# रा.इ.सू.प्रौ.सं NIELIT National Institute of Electronics & Information Technology

An Autonomous Scientific Society under the administrative control of
Ministry of Electronics & Information Technology (MoE&IT), Government of India
NIELIT Bhawan. Plot No.3 PSP Pocket, Sector-8, New Delhi-110077

### FORM OF APPLICATION

Adv	rt. No.: NHQ-12/3/2025-NC (E-3151933)			
Not	e: 1. Application (preferably typed) should be	sent only in the	prescribed format	
	supported by self-attested copies of	testimonials	failing which the	
	application will be rejected out rightly.			
	2. Fill up all the columns except those, which	n are not applic	able.	Affix recent passport size
	3. Applications received after the last date	of receipt of a	pplication shall be	photograph
	summarily rejected.			
		Fee Details		
Trar	nsaction IdDate of Transa		Amount of Tran	saction Rs.
1.	(a) Position applied for (with name of the Centre):	: 		
	(b)Date of Advertisement:	(c) Srl. No. of	nosition applied for	
			position applied for	
2.	Name in full:			
	(in Block Letters) First	Middle	Last	
2				
3.	Father's/Husband's Name:			
4.	(a) Date of Birth (in figure):			
	(a) Date of Dirth (in figure),			
	(b) Age as on (date of publication of advt.)	Years	Months	Days
5.	Whether belongs to SC/ST/OBC/PWD/EWS Catego	ory: If yes, please	specify the Category _	
6.	Gender (Male/Female /Other):			
7.	Marital Status: Married /Unmarried/ Divorcee etc	(Strike out which	over is not applicable)	
7.		. (Strike out which	ever is not applicable)	
8.	Nationality:			
9.	Address for Correspondence:			

		Pin Code
10.	Permanent Address:	
		Pin Code
11.	(a) Mobile No	(b) Email ID

12. Particulars of all examination passed and degree and technical qualifications obtained commencing from School Board or equivalent examination: (Please attach separate sheet, if required)

Examination /Degree	University/Board	Year of Passing	%age of marks	Subjects
Juegree	Oniversity/Board		IIIdI KS	Subjects

# 13. Experience: (Please attach attested copies of the experience certificate) (Please start with the Latest)

(Please attach separate sheet, if required).

	Period		Last Salary	
Post held	From	То	Drawn	Nature of Work / duties
	Post held			, , , , , , , , , , , , , , , , , , , ,

### Total Experience in Years and months: \_\_\_\_\_

14. Working knowledge of Computers: (Yes/No): \_\_\_\_\_\_

15. Any Other relevant info: \_\_\_\_\_

### 16. Documents to be attached

- I) Marksheet of Class Xth.
- ii) Marksheet of Class XIIth.
- iii) Qualification Degrees / Certificates & Final consolidated Mark sheet clearly mentioning aggregate percentage or CGPA as per requirement for the post applied. If in case CGPA is awarded by the University instead of percentage then CGPA TO % conversion formula certificate issued by the concerned University is also required.
- iv) Self-attested experience certificates (including the Experience letter from the current place of working)
- v) Screen-shot of the Fee paid to NIELIT.
- vi) Aadhar Card

## **Undertaking:**

- I. I have gone through the "Terms & Conditions" provided in the website link and shall abide by the same.
- II. I have checked my Qualification, Eligibility, Age and Experience for the post for which I am applying.
- III. It is also Certified that all the information furnished above by me is true, complete, and correct to the best of my knowledge and belief.
- IV. I have submitted only one application for this position.
- V. Further, I have never been debarred by any organization for any illegal activity during my education / service.
- VI. I understand that in the event of any information found false /incorrect /suppressed or any ineligibility being detected before or after the test/interview/selection, my candidature is liable to be canceled/my services are liable to be terminated and no correspondence will be entertained by NIELIT in this regard.
- VII. I understand that NIELIT has the right to accept or reject the application without assigning any reason thereof. NIELIT has full right not to fill any vacancy advertised through this mode.

Place:		Name:
Date:		Signature:
	For Office Use Only	
Place:		Name:
Date:		Signature of Verifying Officer: