Center of Excellence for Khadi (CoEK-2.0)

Setup by KVIC, Ministry of MSME in association with NIFT, Ministry of Textiles

Photograph

**APPLICATION FORM**

Application for the Post of

|  |  |  |
| --- | --- | --- |
| **A ) PERSONAL DETAILS** | | |
| Name |  | |
| Date of Birth :DD / MM / YYYYY | Gender : Male / Female / Other | Nationality : |
| Age : | Category : (Gen / OBC / ST / SC) | Marital Status: |
| Complete Permanent Address |  | |
|  | |
| Address for Communication |  | |
|  | |
| Current location |  | |
| Email id |  | |
| Mobile Phone Number |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **B) ACADEMIC QUALIFICATIONS** | | | | |
| Details | Name of the School/Collage/ Institute/ University | Subjects/Spec ialization | Year of Passing | %  Marks/Gra des |
| 12th Class |  |  |  |  |
| Graduation |  |  |  |  |
| Post Graduation |  |  |  |  |
| Any other training/s or educational degrees |  |  |  |  |
| **C) WORK EXPERIENCE** | | | | |
| Name of the Organization and your designation (You may add more rows) | Main Responsibilities | | Period of employment (To & From) | Pay scale/Salary |
|  |  | |  |  |
|  |  | |  |  |
| **D) DETAILS OF TWO REFEREES** | | | | |
| 1. Name |  | | | |
| Designation and Organisation |  | | | |
| Email Id |  | | | |
| Phone Number |  | | | |
| 2. Name |  | | | |
| Designation and Organisation |  | | | |
| Email Id |  | | | |
| Phone Number |  | | | |

|  |
| --- |
| **DECLARATION** |
| I declare that all information provided in this application form is true and complete. I understand that any false information and misleading statements or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.  Name of the Applicant:  Date: Signature of the Applicant |