Media Lab Asia

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Tel. No.: +91 (11) 2644 3266/2628/8190/91/91/93

Fax. No. +91 (11) 2628 8189 Website: <u>www.medialabasia.in</u>

Advt. No. MLA/REC/PhD Cell/08/14

Post Code:

Part - I

Post Code:

Affix one copy of recent passport size photograph

Proforma for Application

Application for the Post of:

Each column should be filled. Media Lab Asia, may not consider this application, unless all columns have been filled.

	Vame		Appl	icant:																				
· ·																								
2. Fathers' name																								
3. Mothers' name:																								
	Husba			(in c			rrie	l fem	ale	s)														
5. Date of Birth 6. S			Sex					7.	7. Nationality					8. Marital Status										
						F	·																	
9. Pe	erman	ent A	ddres	s wit	h pir	icode	e:																	
Phone Nos. (with STD Codes) (Office)																								
								(Res	ider	ice))												
									(1	Mob	ile))												
Fax												E	-mai	1										
10. 4	Addre	ss for	Corr	espon	denc	e wi	th pi	ncod	e:															
Phone Nos. (with STD Codes) (Office)																								
(Residence)																								
(Mobile))																	
	Have If yes							uitm	ent	in a	ny p	oost	in N	Med	ia La	ab A	sia ea	ırlier'	?					

12. Academic & Professional Qualifications (beginning with Graduation)													
Examination / Degree	Name of the Institute/ Board University	Main Subject / Specialization	Year of Passing	Percentage of marks in aggregate and Division	Rank / Distinction, if any								
13. Field of specia	alization:												
14. Are you emplo	oyed in any Govt./S		_	Autonomous Bodies	s.								
If 'Yes', the appli- interview.	cation should be for		No oper channel or NO	C to be produced at	the time of								
15. Details of present employment:													
i) Name of the	i) Name of the organization with address:												
ii) Designation	ii) Designation of the post held												
iii) Whether pro	iii) Whether present post is held on regular tenure / deputation or adhoc basis and since when:												
iv) If on deputa	ation, details of post	held on regular bas	sis / scale of pay and	d since when:									
v) Scale of pay	v) Scale of pay of the post with Gross salary:												
vi) Total salary if on CTC/Consolidated basis:													
	emoluments/benefits salary) available:												
viii) Any other re	elevant information:												

	Designation &	Total Salary	Period of	f Service	Significant contributions and
Nature of the Organization	Grade	drawn	From	To	the role of applicant in the same
Organization					
18. Association & (if applicable)	Affiliation with Pro	ofessional Bodies	:		
		ofessional Bodies			
		ofessional Bodies	:		
		ofessional Bodies	:		
(if applicable))			e:	
(if applicable)				e:	
(if applicable))			e:	

20. Please furnish two references from rela	rences tives, friends, etc. should b	e avoided.
(1) Name:		Fax Number
A 11		E-mail :
Address:		How does referee know you:
Tel. No.: (Off.)	(Res.)	(Mobile)
(2) Name:		Fax Number
A 11		E-mail :
Address:		How does referee know you:
Tel. No.: (Off.)	(Res.)	(Mobile)
21. Please provide any other Application.		not been covered in this application form, to support your
Declaration:	(Use extra page 1f	space is insufficient)
 I certify that all information knowledge and belief. I from consideration for a from consideration that this approximation is a from the consideration for a from consideration for a from consideration for a from consideration for a from consideration from the constant from consideration from considerati	understand that any false in employment and may result	ation is true, complete and correct to the best of my formation or omission of information may disqualify me in dismissal from the job, if discovered at a later date. Contract of employment nor guarantee for employment. Efore signing this.
Place:	Date:	Signature of the Applicant

Note: Please do not attach any original Certificates. Copies of Certificates in support of Educational Qualifications, Age, Experience, Current Employment and salary may be attached. Testimonials in originals shall be required to be produced if called for interview.

Part – II

(To be filled in by the Competent Authority in the case of candidates who are presently working in Government / PSUs / Autonomous Organizations only)

Certified that:-

- i) The information given above by the officer is correct.
- ii) No vigilance/ disciplinary proceedings are either pending or contemplated against the above mentioned officer.

	Signature	:	
	Name	:	
	Designation	:	
Date:	Department	:	