



**INDIAN INSTITUTE OF TECHNOLOGY
KHARAGPUR – 721 302**

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APPLICATION FOR POST DOCTORAL FELLOWSHIP (PDF)

1. Interested to apply in the Department/Centre/School : _____
2. **NAME OF THE APPLICANT** (In block capitals) : _____
3. Name of the father/guardian : _____
4. Date of birth : _____
5. Nationality : _____
6. Whether SC/ST/OBC/PH (attach certificate) : _____
7. Complete postal address : **Present** : _____

PIN _____ PHONE _____

E-mail _____

Permanent

: _____

PIN _____ PHONE _____

E-mail _____

8. Details of academic record starting from **HIGHER SECONDARY** Examination (Attested copies of the certificates/mark-sheets to be enclosed)

Examination passed	Year	Name of University/Institute	Percentage of aggregate marks/CGPA obtained	Class placed in	Branch /Subjects studied/ Specialisation

9. Performance in **GATE / NET** (if appeared at any period of time):

Name of the Examination	Discipline	Year of Examination	Score/Percentile

10. Experience, if any, of Service and/or research including present position held** :

Name and address of employing organization	Year of joining	Total period up to date	Designation held	Nature of work	Salary Drawn	Remarks

11. Did you apply previously ? : **YES / NO**

If YES give details : _____

12. List of research papers, patents granted and articles published ** : _____

13. Outline of the research work and plan on the basis of which PDF is requested ** _____

14. Give names and contact details of two referees (attach recommendation letters). :

1. _____

2. _____

15. Consent of the Employer/Competent Authority permitting to grant no-objection and to join PDF at IIT Kharagpur in the event of selection.

Signature with date : _____

Designation : _____

Office Seal : _____

16. Declaration of the Applicant :

I hereby declare that all the particulars furnished are correct. I understand that my association direct or indirect with any unlawful organization, is forbidden. I am aware that any incorrect information may lead to cancellation of my candidature/selection. If selected, I promise to abide by the rules and regulations of the Institute.

Date : _____ Signature of candidate in full _____

SCRUTINY OF APPLICATIONS (FOR OFFICE USE ONLY)

Certified that the application has been scrutinized and interview of the candidate as PDF in the Department/Centre/School has been / has not been conducted. He/She is recommended/not recommended, taking into consideration all prescribed requirements.

Signature of the Head of the Department/Centre/School

** Attach additional sheet giving details