INDIAN INSTITUTE OF PUBLIC ADMINISTRATION
INDRAPRASTHA ESTATE, RING ROAD, NEW DELHI-110002

Please paste a passport size photograph

APPLICATION FORM

1. Post applied for : ……

2. Name of the Applicant (In Capital Letters) : ……

3. Gender : M Male F Female

4. Address (with Pin Code) : ……

……

……

……

Email id:……. ……

5. Contact No. : (O)…….. (R)……..

Mobile……

6. Present designation : ……..

7. (i) Scale of Pay, basic pay and total emoluments (Present Position) : ……..

(ii) Whether in receipt of any Pension etc. (if so give details) : …….

8. Date of Birth :……

9. Whether belonging to SC/ST/OBC/PH Category : …….

10. Educational Qualification …….
(Commencing from High School/Higher Secondary Examination)

Sl. No.	Examinations Passed	Subjects taken	College/ University	Year of Passing	% of Marks & Class/Division

11. Details of Ph.D. (a): [A] Awarded [B] Submitted

[P] In Progress

Title of Ph.D. thesis (b):……
:…….
:……..
:…….

Name of the University (c):…….

If awarded, weather (d):…….

Published and if so the details of publication :……..

12. Training /Specialised courses attended :……..
:……

13. Area of Specialization :…….

:……
:…….

14. Experience

Sl. No.	Name of the Organisation served	Designation held	Nature of duties (In brief)	Period of Service from to	Pay scale and basic pay

15. Knowledge of (i) Hindi:……..
(ii) English: …….
(iii) Computers:…….

16. Published work (Attach List) :……

(It is necessary to indicate the Indexed/ISBN/ISSN number against each publication i.e. Journals/Books and/or Research/Policy Papers, as per UGC Regulations)

17. Research work done (Attach List) :……
:……

18. Please give Names and Addresses of two Referees who are not RELATIVES

Name: Name:

1) Postal address: …… 2)Postal address:……
…… …… ……
…… …… ……
…… ……
Email:…… Email:…….. ……
Mobile: ……. Mobile: ……..

19. Whether any pensionary benefit is Drawn or drawn? If so please give particulars :……..

20. Additional Remarks including points the candidate would like the Selection Committee to consider about his canditure. (Attach a separate sheet, If desired)
:……
:……
:……
:……

DECLARATION

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. In the event any information being found false or incorrect or ineligibility being detected, my candidature/appointment is liable to be cancelled/ terminated without any notice.

SIGNATURE

Date:

List of Enclosures:

(a)
(b)
(c)
(d)
(e)
(f)
(g)
(h)
(i)
(j)