RGUKT Advt No: **03/2011** Dated: 29/04/2011



11 E-mail

Rajiv Gandhi University of Knowledge Technologies (A.P.Government Act 18 of 2008) 1st Floor, Vindhya-C4 Building, IIIT, Gachibowli, Hyderabad 500 032, TeleFax: 040-23001830

	APPLICATION FOR	THE POST OF:	
_	tration No : e office use only)		
Reg	gistration fee details		Affix your Recent Passport size
DD No	o: Date :		photograph here
Amount: Name of the Branch:			
		PERSONAL DETAILS	
1.	Applicant's Name (As in the X standard)		
2.	a) Father's / Guardian's Name		
	b) Mother's name		
3.	Date of Birth		
4.	Age (as on 20.05.2011)	Years M	Ionths Days
5.	Native Place & District		
6.	Nationality		
7.	Gender	M	ale / Female
8.	Mailing Address		
9.	Permanent Address		
10	Mobile No		

8. Community: (Put ✓ mark)

00	BC			SC	СТ	PH				
OC	Α	В	С	D	Е	3 C	31	VH	HI	ОН

^{(*} Enclose an attested copy of the Certificate issued by the competent authority)

9. Educational Qualifications: (SSC onwards in chronological order)

Qualification	Subject/ optional	Name of the University / Board	Year of Passing	Marks Obtained	Max. Marks	Division	Percentage of Marks
SSC							
Intermediate							
Graduation							
M.Tech/ Post Graduation							
Ph.D							
Diploma							
ITI / Certificate							
Others							

10. Whether Qualified National Eligibility Test (<i>NET/SLET</i>) in concerned discipline (Yes/No):
11. Specialization, If any:

12. Experience Particulars: (In reverse Chronological Order)

S	l.No	Post Held	Employer	From	То	Scale of Pay

13. Present Position Held: a) Position held b) Name of the Organization	:
b) Name of the Organizationc) Present salary and Scale of Pay	: :
14. Salary desired in case of Retired Empl	oyee Rs
15. List of Publications (If applicable, Ple	ease Enclose)
16. Any other information :	_ _
17. List of enclosures:	
1	
2 3	
4.	
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6	
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9 10	
10.	
18. Declaration	
Ι,	, hereby declare that all the entries made by me
	et of my knowledge and belief. If any information is
found false at any stage, my candidat	ure may be cancelled without assigning any reason
thereof.	
Date :	
Place:	Signature of the applicant