Application Form

COMSATS Institute of Information Technology

Post applied for ______________________________

Subject/Department ______________________________

Note: Please mark/fill information as applicable

Cost Rs.500/-
(I)  **Personal Information**

Name

Father’s Name

Gender  [ ] MALE  [ ] FEMALE

Date of Birth

Qualification (last Deg/Cert)

Domicile

Present Address

Permanent Address

E-Mail

Personal Contact (ph. no.)

NIC #

(II)  **Academic Background /Professional Training**

(a) **Academic Background** (Please start from highest qualification and go in descending order)

<table>
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<tr>
<th>Degree held</th>
<th>Year of award</th>
<th>Field</th>
<th>Institution</th>
<th>Grade / Div</th>
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(b) **Professional Training** (Please start from most recent training and go in descending order)
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<th>Course</th>
<th>Diploma/Certificate</th>
<th>Field of study</th>
<th>Institution</th>
<th>Grade / Div</th>
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(III) **Employment History** (Please start from your recent job and go in descending order)

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<th>Name of Organization</th>
<th>Post held with Pay Scale</th>
<th>Job Profile</th>
<th>Period From to</th>
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(IV) **Research Publications (Faculty positions only)**
(Must include name of journal; year/volume of publication; page numbers; author(s); title)

_________________________________________________________________
_________________________________________________________________
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_________________________________________________________________

(if required please use extra sheets)

(V) **Extra/Co-curricular Activities/Hobbies/Interests (if any)**

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
(VI) **Route of Application**
Through Proper Channel / Direct to CIIT

(VII) **Reference:** Provide Two Academic/Professional References

Reference No: 1. Name________________________ Position______________
Address___________________________________________________________
_____________________________________________ Phone No____________

Reference No: 2. Name________________________ Position______________
Address___________________________________________________________
_____________________________________________ Phone No____________

By signing below and submitting this application form I, _________________________________, confirm that the information I have provided is accurate to the best of my knowledge and that I authorize you to contact the references provided above for further information.

Date________________     Signature   of the Applicant

_______________________________________________________________

**FOR OFFICE USE**

Application Received by:_______________________________  Date _____________

Checked by:__________________________________________  Date _____________

Short Listed []  Not Short Listed  []  if not, reason(s)___________________

_______________________________________________________________

Signature & Name of Dealing Officer___________________________________

Date________________