

**K. E. Society's**  
**Rajarambapu Institute of Technology, Rajaramnagar**  
(An Autonomous Institute affiliated to Shivaji University, Kolhapur)  
Sakharale, Islampur, Tal: Walwa, Dist: Sangli 415 414  
Tel. - (02342) 220329, 9970700700 Email: [director@ritindia.edu](mailto:director@ritindia.edu)

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**Category the Post:** \_\_\_\_\_ (Teaching / Non-Teaching)

**Post Applied for :** \_\_\_\_\_  
(Separate application for each post)

**Subject Applied for:** \_\_\_\_\_

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**APPLICATION FORM**

(Incomplete application will not be entertained)

1. Name in full (IN BLOCK LETTERS) : \_\_\_\_\_  
Surname                      First name                      Middle name
2. Name of Parent/Guardian & Occupation : \_\_\_\_\_
3. Candidate's full Postal/ Permanent Address with Pin Code : \_\_\_\_\_  
Telephone / Fax No. : \_\_\_\_\_  
Mobile No. : \_\_\_\_\_  
E-mail ID : \_\_\_\_\_
4. Corresponding full Address : \_\_\_\_\_  
\_\_\_\_\_
5. Telephone / Fax No. : \_\_\_\_\_
6. Whether belonging to backward class (if so, give details) (Attach Copy) : Caste \_\_\_\_\_ Sub Caste \_\_\_\_\_
7. Date of Birth (Copy attached) : \_\_\_\_\_
8. Age : \_\_\_\_\_ Yrs.      \_\_\_\_\_ Months
9. Gender : Male / Female
10. Mother tongue : \_\_\_\_\_

11. Particular of Educational Qualification:  
**(Attested copies of Mark sheet & Certificate attached)**

Sr. No.	Examination Passed	Name of University/ Board	Month & Year Of Passing	Subjects offered stating whether major, special, principle (wherever applicable)	% Of Marks Obtained	Class / Division/ Grade
1	10 <sup>th</sup> (SSC)					
2	10+2(HSC) / Diploma					
3	Degree					
4	P.G.					
5	Ph.D.					
6	* NET/SET					

**\* for the posts Humanities and Sciences.**

12. Additional Qualification, if any : (GATE etc.)

13. Teaching Experience : **Total Years: Year ----- Month ----- Day-----**

Institution (College / University / Dept.)	Name Of University	Subject Taught	Position Held	Nature of Appointment (FT / PT/ CHB)	Period of App.- ointment with Dates		Last Pay drawn in the Inst. (Scale & Basic Pay)
					From	to	

14. Professional Experience, if any **(Attested copies attached)**

**Total Years: Year ----- Month ----- Day-----**

Sr. No.	Name of the Employer	Position Held	Period of Appointment with Dates		Last Pay drawn in the Company (Scale & Basic Pay)
			From	To	

Sr. No.	Name of the Employer	Position Held	Period of Appointment with Dates		Last Pay drawn in the Company (Scale & Basic Pay)
			From	To	

15. List of Publications, Journal, if any : (Attach a List)

16. Paper presented in Conference : (Nos.), if any  
(Attach a list)

17. Membership of Professional bodies : (Along with documents)

18. Co-curricular & Extra Curricular : Activities, if any (Attach a List)

19. Additional Information, if any : (Attach Copy)

**Sir,**

**I hereby declare that all entries in this application are true and correct to the best of my knowledge and belief.**

**Place:**

Signature of the Candidate.

**Date**

:

(Name: \_\_\_\_\_)

**Note:**

1. The forms should be filled in by the candidate in typing/handwriting neatly. It should be completed in all respect and accompanied by attested copies of supporting documents. Incomplete application will not be entertained.
2. Candidates, who to appear for more than one post, should submit separate application for each post I-Card Size Photo