ANNEXURE-1







National Institute of Food Technology Entrepreneurship and Management

(Deemed to be University (De -navo Category) under section 3 of the UGC Act, 1956 and An autonomous Organization under Ministry of Food Processing Industries, Govt. of India) Plot No. 97, Sector-56, HSIIDC Industrial Estate, Kundli – 131028, District-Sonipat, Haryana Application Form

		Application Form		Affix a passport size color
Ref	erence No.:			photograph
Dep	t. Applied For:			
Pos	t Applied for:			
1.	Full Name:			
	First Name	Middle Name	Last Name	
2.	Husband's/Father's Nar			_
	First Name	Middle Name	Last Name	
3.	Personal Details:			
a)	Date of Birth (Enclose	? Proof):		
b)	Age (Y-M-D):			
c)	Gender:			
d)	Marital Status:			
e)	Nationality:			

4.	Please tick the appropriate box (Please attach a certificate from the authority prescribed under
	government rules for SC/ST/OBC)

General	SC	ST	OBC	PH

	Degree	Specializatio n / Discipline	Coll /University		Year of joining	Year completed	Percenta ge/ CGPA
(b) Permanent Address: Mobile: ID: 6. Academic record starting with Matric (Pletarnscripts/ mark sheets/ grade card and continuous)					_		s oft copies of
5. (a) Contact (b) Perma			- - -			

7. Present Employment:

Designation	
Organization	
Date of joining (dd/mm/yyyy)	
Scale of Pay in Rs.	
Pay in Rs.	
Total Emoluments (per month)	
in Rs.	

8. Employment History (Starting from the latest)

Sl. No.	Position	Organization/Instituti on	Date of joining	Date of leaving	Duration

9. Information of three Referees (It is preferable that you include your PhD advisor/Senior Industrial head under whom working and someone who is familiar with your recent work):

	Referee 1	Referee 2	Referee 3
Name			
Designation			
Organization/ Institute			
Address			
Telephone			
E-mail			

10. List of Publications (Enclose separate list giving details of publications: Authors, Title, journal name, year, volume, pages, etc)

Publication	National	International	Total
In refereed journals			
In conference proceedings			
Books/ Book Chapter			

11. Awards and Recognitions with details (please enclose the proof)

Exam/Award	Agency	Year passed/qualified
GATE		
NET		
JRF		
SRF		
INSPIRE		
OTHERS		

12. Professional Training Received

Sl. No.	Name of Training	Organization where training was received	Year	Duratio n

13. Membership of Professional Bodies/Organizations

Sl. No.	Name of the Professional Body	Membership Status (Life/Annual)

14. Important Conferences/ Seminars Attended

Sl. No.	Conference/Seminar Title	Place (if any)	Date

16. I hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that the entries in this form as well as in attached sheets are true to the be of my knowledge and belief.	
Date:	
Place:	(Signature of Applicant)

Send form to: $\underbrace{niftemprojectfellow@gmail.com}$ and $\underbrace{hod.fst@niftem.ac.in}$ on or before 01.09.2025 by 6.00 PM.

➤ Note: No TA/DA shall be paid for attending interview/for joining after the selection.