



**TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME (TEQIP – II)**

**Indian Institute of Engineering Science and Technology, Shibpur**

*(Formerly Bengal Engineering and Science University, Shibpur)*

P.O. Botanic Garden, Howrah – 711 103, West Bengal, INDIA.

(Tel: 91-33-2668 4561 -63 Ext. 456; Tele- Fax: 91-33-2668 5186)

(E-mail: [besu.teqip@gmail.com](mailto:besu.teqip@gmail.com))

**Application for MIS Officer in TEQIP II Project IEST, Shibpur**

1. Name:		Please fix a passport size photo here																																				
2. Father's / Husband's Name:																																						
3. Date of Birth:																																						
4. Age as on 01-01-2016:																																						
5. Nationality:																																						
6. Category:	Gen / OBC /SC /ST																																					
7. Present address:																																						
8. Permanent address:																																						
9. Mobile no:																																						
10. Email:																																						
11. Educational qualification with copies of testimonials :																																						
<table border="1"><thead><tr><th>Name of the Exam</th><th>Board /Univ.</th><th>Year of Passing</th><th>Subject taken</th><th>Division</th><th>% of Marks</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>			Name of the Exam	Board /Univ.	Year of Passing	Subject taken	Division	% of Marks																														
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12. Professional Qualification related to DTP and MIS:

Name of the organization	Name of the course	Certificate If any

13. Past experience, if any (Attach certificates from the employer) :

Name of the organization	Posts held with Past/Present Employer/Employers	Monthly wages drawn

14. Any other information which may justify your candidature: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I ,....., the undersigned do hereby solemnly declare that the above information is true to the best of my knowledge and belief. In case any of the above information will at any time be found incorrect, my appointment will be deemed as void, I shall be liable for immediate termination. I understand that if I am selected I shall be appointed upto 31.10.2016 or till the TEQIP-II project will terminate (whichever is earlier).

Place :

Date :

\_\_\_\_\_  
Signature of the applicant