**INSTITUTE OF HOTEL MANAGEMENT – DEHRADUN**

**APPLICATION FORMAT**

**Contractual Faculty for the Financial Year 2014-15**

|  |  |  |
| --- | --- | --- |
| 1. | Name of the Candidate ***(in Capital letters)*** |  |
| 2. | Date of Birth***(Please attached 10th Pass Certificate for age proof)*** | DD | MM | YY | Age as on 01.01.2015 |
|  |  |  |  |
| 3. | Father’s Name |  |
| 4. | Nationality |  |
| 5. | Gender (Male/Female) |  |
| 6. | Marital Status | Married | Single |
|  |  |
| 7. | Category (Please tick in appropriate Box) | Gen | SC | ST | OBC |
|  |  |  |  |
| 8. | **Address with Pin Code** | **Correspondence** | **Permanent** |
|  |  |  |  |
| 9. | Tel. No. |  |
| 10. | Mobile No. |  |
| 11. | E-mail ID. |  |
| **12.** | **Educational Qualifications:** |
| ***Sr. No.*** | ***Name of the Exam passed*** | ***Name of the Board/NCHMCT/IGNOU/SBTE/University*** | ***Year of passing*** | ***% of Marks upto two decimals/Division*** |
| a) | Degree in Hotel Management/Degree in Hotel Administration |  |  |  |
| b) | Masters in Hotel Management/Degree in Hotel Administration |  |  |  |
| c) | Any other relevant qualification |  |  |  |
| **13.** | **Work Experience (in chronological order beginning form the present job):** |
| ***Sr. No.*** | ***Designation & Pay Scale*** | ***Organization*** | ***Period of service*** | ***Total Experience*** |
| ***From*** | ***To*** | ***Industry*** | ***Teaching*** |
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14. Present post held with pay:…………………………………………………….

15. Any other information desired to be furnished…………………………………………………………………………………………………………………………………………………….………(add additional Sheets if required)

(Signature of the applicant)

Date:………………………………..

Place:……………………………….

**DECLARATION**

 I hereby declare that all the particulars furnished by me in this application are true to the best of my knowledge and belief and I am also medically fit for the job. If any of the information/particulars furnished by me is found to be false at any stage, I am aware that my candidature/selection is liable to be rejected/cancelled by the appropriate authority without assigning any reason.

(Signature of the applicant)

Name:………………………………………………………

Place:……………………………………..

Date:……………………………………..