



**IV. ANY MAJOR ILLNESS/PHYSICAL DISABILITY (if any)**

(Please give details)

Major Illness	
Physical Disability:	

**V. ACADEMIC QUALIFICATIONS**

Description	Title	School / College / University / Institute	Year of Passing	Medium of Instruction	Aggregate Marks (%)
School					
Junior College					
Graduation					
Post Graduation					
Professional Qualification					
Other Qualification (if any)					

\* Please specify if you have not attended a full-time college or completed the course through correspondence or one-time sitting or in less than 3 years

**Have you ever been suspended or placed on probation at any School or College or Institute or University for academic or disciplinary reasons?** [Please (☐)] Yes  No

If "Yes" please give details: \_\_\_\_\_  
 \_\_\_\_\_

**Have you ever been convicted by any criminal court with fine and/or imprisonment?** [Please (☐)] Yes  No

If "Yes" please give details: \_\_\_\_\_  
 \_\_\_\_\_

**VI. COMPUTER LITERACY**

All applicants are required to have basic skills in computing. They include word processing, spreadsheet and file management.

	Please Specify	Level of Proficiency
Operating Systems		
Application Packages		
Languages		

**VII. AWARDS AND RECOGNITION**

(List distinctions, honors, scholarships and awards (academic, extracurricular, professional, community).)

Award	Date	Basis of Selection

**VIII. EXTRA-CURRICULAR ACTIVITIES**

(Please list down the extra-curricular activities, if any, in which you participated during your school/college days).


**IX. ARTICLES AND BOOKS**

Have you ever written any articles and books for your school/college magazine or general newspapers/ magazines/professional magazines/journals?

[Please (☐)] Yes  No 

If "yes", please enclose photocopies of the same

**X. WORK EXPERIENCE**

(Please start with current employer and attach sheets if space is not sufficient)

CURRENT EMPLOYMENT							
Organization							
Address					Pin:		
Nature of Business							
No. of Employees (Approx.)				Gross Turnover (Approx.)			
Initial Position				Present Position			
Date of Joining					Since		
	dd	mm	yyyy		dd	mm	yyyy
Reason for seeking a change							
PREVIOUS EMPLOYMENT							
Employer's Name & Address* Turnover, no. of employees	Period of Service		Total No. of Years/Months	Designation & Area of work	Reason for change		
	From	To					

\* May we refer to your current and previous employers? [Please (☑)] Yes  No

(No reference will be made to the current and previous employers without your permission)

Have you ever been suspended or dismissed from service? [Please (☑)] Yes  No

If "Yes" please give details: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**XI. EMOLUMENTS OF CURRENT EMPLOYMENT**

Components	On Joining		Current / Now	
	Per Month	Per Annum	Per Month	Per Annum
<b>A. SALARY</b>				
Basic				
DA				
HRA				
CCA				
Conveyance Allowance				
Incentives				
Personal Allowance				
Medical Allowance				
Other Allowances*				
<b>Gross Salary (A)</b>				
<b>B. BENEFITS</b>				
PF				
ESI				
Medical Reimbursement				
LTC				
Others				
Gratuity				
Super Annuation				
<b>Total Benefits (B)</b>				
<b>Total Salary Benefits (A + B)</b>				

\* Please specify other allowances if any:


**XII. STRENGTHS**

(Please identify your major strengths, not exceeding 4 lines)

How do you propose to build on these strengths?

**XIII. WEAKNESSES**

(Please identify your major weaknesses not exceeding 4 lines)

How do you propose to overcome these weaknesses?

**XIV. CAREER GOALS & ASPIRATIONS**

(Please identify your career goals in the near-term (next 5 years) and long-term (next 10 years))

**XV. Why do you wish to work for The University? Focus on your potential to make significant contributions.**  
 (Please think carefully and write)

**XVI. Are you a current or past student of any Program of The University?** [Please (☐)] Yes  No

If "Yes" please give details:

Enrolment No.	Program	Result

**XVII. Have you applied in the past and / or been interviewed by The University?** [Please (☐)] Yes  No

If "Yes" please state

Applied for the post of: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Interview	D	D	M	M	Y	Y	Outcome of the application/Interview [Please (☐) at appropriate box]	Selected & Joined		Selected & Not Joined	
								Not Selected		Not called for Interview	

Organization \_\_\_\_\_

**XVIII. Have you ever worked with The Icfai in the past?** [Please (☐)] Yes  No

If "Yes" please give details:

Organization:	Location:	Period of working: From: _____
		To : _____
Department :		
Designation :		Reason for leaving:

**XIX. Whether any of your relative(s) is/are currently working in The University?** [Please (☐)] Yes  No  If "Yes" Specify

1. Name: \_\_\_\_\_ Designation: \_\_\_\_\_ Organization: \_\_\_\_\_

Dept: \_\_\_\_\_ Location: \_\_\_\_\_ Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_ Designation: \_\_\_\_\_ Organization: \_\_\_\_\_

Dept: \_\_\_\_\_ Location: \_\_\_\_\_ Relationship: \_\_\_\_\_

**XX. References**

Please give two references (not being your relatives), who are familiar with your work and their mailing address and residential phones.

Name : _____	Name : _____
Address: _____	Address: _____
_____	_____
_____ Pin _____	_____ Pin _____
Phone: Off: _____ <i>(City code - Area Code - Number)</i>	Phone: Off: _____ <i>(City code - Area Code - Number)</i>
Res: _____ <i>(City code - Area Code - Number)</i>	Res: _____ <i>(City code - Area Code - Number)</i>
E-mail: _____	E-mail: _____
Mobile: _____	Mobile: _____

**XXI. Special Points**

Any special points you wish to bring to the notice of The University in support of your candidature?  
(Tell us why we should select you).

**XXII. Expected Emoluments**

(Please indicate your expectations in terms of gross monthly emoluments)

**DECLARATION**

I certify that the information presented in this Employment Application Form and other application material is accurate, complete and honestly presented. I understand and agree that any inaccurate information, misleading information or omission will be cause for the revision of any offer of employment or for disciplinary action or dismissal if discovered at a later date. I agree to abide by The Icfai University Sikkim Code of Ethics in letter and spirit.

I agree to abide by the Rules and Regulations covering the employment with The Icfai University. I clearly understand that the jurisdiction for all disputes is Hyderabad, India.

\_\_\_\_\_  
Signature of the Applicant

Place :

Date :

Name : \_\_\_\_\_

**FOR OFFICE USE ONLY**

Selected                       Waitlisted                       Rejected

\_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_

**SIGNATURE OF THE SELECTION COMMITTEE MEMBERS**

\_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_

**NAMES OF THE SELECTION COMMITTEE MEMBERS**

**The Icfai University Sikkim**