

National Institute of Electronics and Information Technology

NIELIT Bhawan, Plot No. 3, PSP Pocket, Institutional Area Sector-8, Dwarka, New Delhi-110077

Advt. No. I-14030/19/2020-Finance

Date:	04.02.2021
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on	Engagement for the position of Resource Person (Finance) on short term contract purely on a temporary basis on consolidated remuneration.					
		Post Applied for-	- Recourse Po	erson (Fin	ance)	
Nam	ne of the Candidate:		Father's	Name:		
Date of Birth: (DD/MM/YYYY) Mobile No.:		(ST/SC/G Email ID:	Category: (ST/SC/GEN/OBC/EWS) Email ID: Permanent Address:			
	espondence Address 1. Educational/Tec	chnical Qualification 10th			attested copies o	
SI. No.	Qualification	Name of the University		Year of Passing	Percentage/ Grade	Document Attached*
SI.		n of experience in chrono ization Duration/Period		Description (of duties	Experience
No.		From To				Certificate attached*

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*All the supporting documents for qualification and experience are mandatory to attach.				

Total Experience in years and months:

- 3. Documents to be attached (self-attested):
- Class Xth Certificate.
- Marksheet of Class XIIth.
- Degree Certificate and marksheets, as per requirement for the post applied.
- Self-attested experience certificates (including the Experience letter from the current employer)
- Govt. issued Photo Id Card (e.g Aadhar/ PAN/ Passport / Voter ID etc.)

Undertaking:

- I. I have gone through the "Terms & Conditions" provided in the website link and shall abide by the same.
- II. It is also Certified that all the information furnished above by me is true, complete, and correct to the best of my knowledge and belief.
- III. I have submitted only one application for this post.
- IV. Further, I have never been debarred by any organization for any illegal activity during my education/service.
- V. I understand that in the event of any information found false/incorrect/suppressed or any ineligibility being detected before or after the test/interview/selection, my candidature is liable to be canceled/my services are liable to be terminated and no correspondence will be entertained by NIELIT in this regard.

Place:	Name:
Date:	Signature:

-For Office Use Only-

Signature ar	d Name of Verifying Officer:
Place:	
Date:	