

NATIONAL INSTITUTE OF TECHNOLOGY KARNATAKA, SURATHKAL P.O. SRINIVASNAGAR, MANGALURU - 575 025, D. K.

Website: http://www.nitk.ac.in

Application Form for Walk-in-Interview

N	ame:			
D	ate of Birth:		Affix a passport- size photo	
Р	ermanent Address:			
С	orrespondence Address:			
G	ender:	E-Mail (mandatory):		
(p	ategory (GEN/ST/SC/OBC/EWS/P clease enclose attested copy of certificate) obile Number (mandatory):	WD):		
Qualific	eation Details (10 th onwards):			
SI. No	Name of the Examination	University/Board/Institute	Year of Passing	Division/ Class

Experience Details:							
SI. No.	Company/Firm/Institute/Any other Organization	Date of Joining	Date of Leaving	Salary per month	Total Experience		
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I hereby declare that the entries in this form are true to the best of my knowledge and belief, I understand that my candidature will be cancelled if any of the information is found to be false or incorrect. Further, if selected, I will abide by the rules and regulations of the Institute and

Signature

also the directions given to me from time to time.