

राष्ट्रीय शिला यांत्रिकी संस्थान

NATIONAL INSTITUTE OF ROCK MECHANICS

(An Autonomous Research Institute under Ministry of Mines, Govt of India)
HEAD OFFICE, OUTER RING ROAD, ESHWAR NAGAR, BSK-II STAGE, BENGALURU-560 070

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Phone: 080-26934400 (Director); Other # 080-269344 02 to 14; Fax: 080-26934401

APPLICATION FORM

(Neatly filled in application forms should reach the Controller of Administration, NIRM latest by the due date as indicated in the advertisement. Applications written illegibly and without supporting documents including fee or incomplete entries will be summarily rejected.)

Advertisement No.:		Due date		
APPLICATION FO	R THE POST OF			
 Name (in BLOCK LETTERS) (Female applicants to prefix Ms.) a. Father's Name 	: :		Affix here a passport size photograph and	
b. Occupation (Past, if retired)	:		sign across with	
3. (a) Address for communication	n:		your name on the top.	
Any change in address after submission of application form should be notified to this office immediately.				
(b) Permanent address :				
(c) Contact phone No: (prefix STD code) (d) e-mail id:				
4. a. Nationality :				
b. Passport No. :				
5. If you are a persion of Indian of (a) Whether a citizen of India by be If yes, then state to which you	oirth?	off the o	YES / NO	
(b) Whether a person migrated from	6	•	YES / NO	
(c) Whether a subject of Nepal or	•	:	YES / NO	
6. Details of the application fee p				
7. (a) Date (& Place) of birth :			se proof in support of date of birth)	
(b) Marital Status: Married/	Single	(Strike	off the option not applicable)	
8. Nature of present work/ job (Nature of Prival Government Servant/ Prival				
9. Category (General/SC/ST/OBC) (Please attach appropriate certificate)				

10. (a)	Have you ever b	een suspended or di	smissed fro	om past service	: YES /	NO
(b)	Have you ever b	een arrested/ prosec	uted (while	in service or othe	erwise) : YES /	NO
11. (a)	Religion to which	ch you belong	: .			
(b)	Have you ever o	changed your religio	on : Y	ES/ NO		
12. Educ	cational & Profes	sional qualification	s - (Start w	ith SSLC/ SSC)		
Exam	Board	Dui auvii	Year of	Major	CGPA/%	Class
Passed	Universi	of study	passing	Subject(s)	of marks	
	of publications	: ırnals) :	Inte	ernational (Symp	ocium) :	
, ,	National (Journal	,		tional (Symposiu		
` ,	Other publication			nonai (Bymposic		••••••
	•	e significant publicati	ons and encl	lose copies):		
i.						
ii.						
iii.						
iv.						
v.						
14. Expe	erience relevant	to the area of specia	lisation as	per advertiseme	nt (mention in a	detail) :
a.		-		-		
b.						
c.						
d.						
15. Have	you been outsic	le India? If YES, plo	ease provid	e details below:		
Co	untry visited	Period of vis	sit	Purpose o	f visit	

16. Employment details (in reverse chronological order) (*Enclose certificate of experience in respect of minimum desirable qualification*)

Employer	Date of Joining	Date of Leaving	Designation	Nature of Job done	Gross monthly pay

Advt. No.	Date of Application	Post applied for	Whether called for Interview	Date of Interview

Advt. No.	Date of Application	Post applie	d for	hether called or Interview	Date of Intervie
	Application			or interview	
18. Name and a	nddress of two Refer	rees for verifying	ng your crede	entials :	
		•	• •		
19. a. Are you a	a Government Serva	nt? : YE	S/NO		
b. If yes, the	en nature of appoint	ment? : TE	MPORARY/	PERMANENT	T/ CONTRACT
20. a. Are you	willing to accept the	minimum init	ial pay offere	d? : YE s	S / NO
b. If NO, th	en the lowest initial	monthly basic	pay expected	: Rs.	PM
	n joining time requirest for extension of join				days
knowledge and	re that the informa belief. If, at any stag to the post may be re	ge, if they are t	found mislead		_
Place :					
NOTE · Annlia	eation form without]		Signate	rus of Annlicent

NOTE : Application form without	Signature of Applican
signature and date will be rejected	Date :

ENDORSEMENT FROM THE HEAD OF THE INSTITUTION

(Candidates already employed should route their application through proper channel with the following endorsement either on this application form or separately. While they may submit an advance copy, the duly forwarded copy by the present employer should reach the destination within 15 days of closing date of receipt of Direct application forms)

_	tion to allow to nst Advertisement No of the			
Office seal	Signature with date : Name & Designation : with seal/ stamp	esignation:		
Check-list of enclosures* (Attested photoco	ppy only, original should not be submitted):	=		
 Certificate in support of date of birth Certificate of the qualifying examinat Certificate for SC/ST/OBC/PH / Otl Essential experience certificate¹ Passport size signed photo affixed DD towards application fee¹ 	: YES/NO : YES/NO	d		

^{*} Strike off the option not applicable. Applications without essential enclosures (1-6) will be rejected.

^{**} Applicable only for persons employed in state/ central government service.

^{1.} Application received without these two relevant documents will not be processed.