

INSTITUTE OF HOTEL MANAGEMENT, CATERING TECHNOLOGY & APPLIED NUTRITION
Veer Savarkar Marg, Dadar-West, Mumbai-400 028

Application for the Post of - :Lower Division Clerk

1. Name in full (In Block Letters): _____

2. Father's Name : _____

3. Date of Birth (DD-MM-YYYY): _____

4. Age as on 29.02.2024: Year Month Days

(For age proof attach attested copy
Of the Matriculation certificate)

5. Category (GEN/SC/ST/ EWS/OBC) : _____

6. Permanent Address: _____

7. Correspondence Address : _____

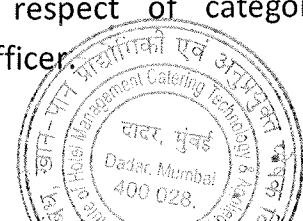
8. Telephone No. with STD Code: _____

9. Email ID : _____

10. Qualification : Give information for matriculation and onwards course including professional, course:

S.N.	Exam Passed	Month & Year of Passing	Name of the Board/Institute/University	Percentage (%) of Marks
1.				
2.				
3.				
4.				
5.				
6.				

Please attach attested photocopies of certificate in respect of category, qualification and last pay slip duly attested from Gazetted Officer.



(i) **Experience**(tabulated in chronological order);

S.N.	Post	Name & Full address of Employer	Period			Nature of Work
			From	To	Total	
1.						
2.						
3.						
4.						

Please attach attested copies of experience details duly attested from Gazetted Officer. Please attach extra sheet if required.

Details of Application Fee:-

Demand Draft No..... Date:- Amount:-

Verification:

I hereby certify that the information furnished above is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. I am aware, that, in case, I have given wrong information or suppressed any material fact or factual information, or I do not satisfy the eligibility criteria according to the advertisement, then my candidature will be rejected/Services terminated in between the selection process and even after employment without giving any notice or reason thereof.

(Signature of the Candidate)

Place:

Name:

Date:

