राष्ट्रीय प्रौद्योगिकी संस्थान, सिलचर

NATIONAL INSTITUTE OF TECHNOLOGY, SILCHAR

स्थापना शाखा

ESTABLISHMENT SECTION

No.NITS/Estt./PVR/19/13/12306-16

Date: 30/9/18

## NOTICE

All faculty members who joined a fresh in this institute in the year 2018 is hereby directed to submit the form Annexed herewith to the undersigned on or before 24.09.2018 for the purpose of Character Antecedents Report.

Registrar

## Copy to:-

- 1. To the HODs, CE, ME, Management, Chemistry, E&IE, EE, ECE, CSE, with a request to circulate the same to the newly joined faculty members.
- 2. Sr. Technical Office, CCC is hereby requested to upload the same to the institute website.
- 3. Guard File for record

...... for information & action where necessary.

## CHARACTER AND ANTECEDENTS VERIFICATION FORM

Sl No.	Particulars	:	
1.	Full name aliases if any	:	
	(Please indicate if you have added or dropped at any stage any part of name or surname)		
2.	Present address in full, with police station and district		
3.	Home/Permanent address in full with police station and district.	¥.	
4.	Particulars of place with periods of residence	where you have resid	ded during the preceding two years.
	Period Address in fi	ull with P.S and Dist	rict
	From To		
5	Father's name in full with aliases, if any		Nationality

			3 3	
	Place of Birth	Occupation (If employed give designation and office full address)	Present Address	. Permanent Address
6.	Applicant's Nat	ionality	:	
7,	Date of Birth	1	Age at Matriculation	n
8.	Two marks o	of identification		
9.	Educational Qu	nalification showing	places of education with yrs	s in school & colleges since 15 yrs of age.
	l ame of school/C ll address	olleges with	Period	Examination Passed
			From	Го
	3			High School/SSC/Matri
				Intermediate
				Graduation
				Post Graduation
				Ph.D
				Diploma
				Others (if any)

Perio	od	Designation	Full name & address of employer/organization	Nature of employment	Reason for leaving previous services
11	The prev	vious employment v	vas under the Govt. of India/State	Yes	No
	Undertaking owned of controlled by Govt./or autonomous body			Yes	No
	Universi	,	briefly whether you had been	Yes	No
	Remove		ervice on any disciplinary	Yes	No ,
		er before or at a sul	led upon to explain your conduct in osequent date of your actual	Yes	No
X.	Dismissa	ıl/removal retireme	nt, etc.	Yes -	No
12 a	Have you ever been arrested?			Yes	No
b	Have you ever been prosecuted?		Yes	No	
С	Have you ever been kept under detention?			Yes	No
d	Have you ever been bound down?		Yes	No	
е	Have you	Have you ever been fined by a court of law?		Yes	No
f	Have you	Have you ever been convicted by a court of law?		Yes	No
g	Is any cas	se pending against y	ou in any court of law?	Yes .	No
h	Whether discharged expelled withdrawn from any training institution under the govt. or otherwise?		Yes	No	

Name & address of two responsible persons other than relatives to whom you are known.	1.
	2.

I certify that the following information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances, which might impair my fitness for issue of PIC for airport entry.

Counter Signature of Employer/ authorized Signatory with stamp

Signature of applicant

Date:

Place: