

NATESAN INSTITUTE OF COOPERATIVE MANAGEMENT, CHENNAI (NICM)

APPLICATION FORM FOR THE POST OF LECTURER ON CONTRACT BASIS

(a) Advt. No..... (b) Dated..... (c) News Paper

1. Name of the Applicant  
(Write in BLOCK letters)
2. Full Postal Address for  
Communication with PIN code
3. Permanent Address with PIN Code
4. Mail ID and Contact No.  
(Mobile / Land No. with code)
5. Date of Birth  
(Pl. attach Proof of age)
6. Nationality, Religion & Caste
7. Please tick whichever is applicable  
a) Sex (M/F) M F  
b) Marital Status Married / Unmarried
8. Please indicate languages known  
a) Read :  
b) Speak :  
c) Write :
9. Educational Qualification

Photo

(Start from the highest qualification and proceed up to SSLC and attach photocopies to establish your claim)

S. No	Particulars of the course	Subjects / Specialization	University/ Board	Marks Obtained with Percentage	Division / Grade	Year of Passing
1						
2						
3						
4						
5						

10. Please indicate whether you are qualified with NET/SLET/Doctorate

NET Yes/No

SLET YES/No

Doctorate Yes/No

(If Yes, pl attach copy of certificate)

11. Experience: (Start from the latest and go backwards)

S. No	Name of Dept. / Institution	Designation / Post held	Duration		No of Years	Duties
			From	To		
1						
2						
3						
4						

[N.B. Separate sheet can be used for 9 & 11, if space provided is found insufficient]

12. Whether you are interested to handle the following subjects apart from specialization subjects?  
Please tick.

- |                                      |            |
|--------------------------------------|------------|
| a) Cooperation                       | : Yes / No |
| b) Cooperative Management            | : Yes / No |
| c) Cooperative Accounts              | : Yes / No |
| d) Cooperative Banking               | : Yes / No |
| e) Cooperative law and allied laws   | : Yes / No |
| f) Banking Technology                | : Yes / No |
| g) Any other subject, please specify | :          |

13. Indicate Areas of your interest other than academic

Declaration:

I hereby undertake that above information are true and correct to the best of my knowledge

Place:

Date:

(Signature of the Applicant)