

# INDIAN INSTITUTE OF MANAGEMENT ROHTAK

## Application Form

Traineeship applied for for : \_\_\_\_\_

1. Name :
2. Father's/Husband's Name :
3. Date of Birth :
4. Sex :
5. Marital Status :
6. Nationality :
7. Educational Qualifications :

(Attach self-attested copies of certificates)

Qualification	Board/ University	Date of Commencement	Date of Passing	% Marks	Class/ Division

Photo  
Self Attested

8. **Work Experience** (Post-qualification): (Starting from the most recent)

(Attach self-attested copies of certificates)

Organization	Designation	Date of Commencement	Date of Leaving	Gross Salary	Reasons for Leaving

9. **Language Proficiency** : (Please tick relevant cells)

Language	Fluent in Speaking	Fluent in Reading	Fluent in Writing
English			
Hindi			

10. **Technical Skills** : (Please tick relevant cells)

(Attach copies of certificates)

### A. Common for all Positions

Skill	Excellent	Good	Average	Weak	Nil
Computer Operations					
Database Applications					
10-Finger Typing					
Shorthand					
Any Other Skill:					

**B. For Trainee-Knowledge Resource Centre (Library)**

Skill	Excellent	Good	Average	Weak	Nil
Cataloguing					
Circulation					
Classification					
Accession					
Procurement					
Libsys/OPAC					
Journal Subscription					
Database Subscription					
Any Other:					

**11. References:**

Detail	Reference 1 (Current Employer)	Reference 2 (Previous Employer)
Name		
Designation		
Organisation		
Contact Landline		
Mobile No.		
E-mail ID		

**12. Address:**

Details	Permanent	Communication
House Name/No.		
Street/Locality		
Town/City		
District & State		
Residence Phone		
Mobile No.		
E-mail ID		

**13. Do you know anyone in IIM Rohtak: Yes / No**      if Yes, please give the details:

**14. Details of any relative already working in IIM Rohtak:**

**15. Details of enclosures attached with the application:**

1. .... 2. ....  
 3. .... 4. ....  
 5. .... 6. ....

**16. Declaration:**

I hereby declare that all the statements made in the application are true and complete to the best of my knowledge and belief. I understand that if at any point of time, any of the information is found to be false, my candidature may be cancelled/dismissed and the Institute may take any necessary action against me.

Place : \_\_\_\_\_

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Signature : \_\_\_\_\_