



INDRAYANI VIDYA MANDIR'S  
**YASHODA MAHADEO KAKADE COLLEGE OF ENGINEERING**

Talegaon Chakan Road, Talegaon Dabhade, Tal. Maval, Dist. Pune 410 507

Approved by AICTE • Govt. of Maharashtra • Dr. Babasaheb Ambedkar Technological University  
DTE / Institute Code - EN16352

## APPLICATION FORM

Advertisement No.: 1. Loksatta Paper  
2. The Indian Express  
3 Financial Express

Dated: - 19/03/2026  
Dated: - 19/03/2026  
Dated: - 19/03/2026

Affix recent passport  
size photograph with  
self-attestation

To,

**The President/ Secretary,**  
Indrayani Vidya Mandir's  
Talegaon Chakan Road, Talegaon Dabhade,  
Tal-Maval, Dist -Pune,  
Pin-410507.

**Sub. :** Application for the post of: \_\_\_\_\_  
(Mention the Name of Post)

Sir,

I hereby submit my application for the post of \_\_\_\_\_  
(Write name of the post in handwritten) with the following details:

## APPLICATION FORM

(Please read the general instructions, Terms & conditions before filling the form)

<b>1. Personal Details</b> (In Capital Letters)							Enclosure No.	
Full Name (Surname First)								
Full Name (in Devnagari Script)								
Date of Birth: (DD/MM/YY)	DD	MM	YY	Age (In Years) -----/-----/-----	MM	YY		
Gender: (Male/Female)				Marital Status: _____				
Nationality:				Religion:				
Aadhar Card No:	Pan Card No:-							
Category with Caste (SC/ST/VJ-A/NT(B/C/D)/ OBC/OPEN/EWS/ESBC, PH, etc.)								
Particulars of Physical Disability, if Applicable								

<b>2. Address:</b>	
Address for Correspondence	Permanent Address
<b>Pin Code :</b>	<b>Pin Code</b>

<b>3. Communication Details</b>	
E-mail ID	
Phone No. with STD	
Mobile No.	
Fax No. with STD	

<b>4. Educational Qualifications</b> (Matriculation onward)					Enclosure No.
Name of Exam. /Degree	University / Institution /Board	Year of Passing	Percentage of Marks	Division / Class / CGPA	
S.S.C.					
H.S.C.					
U.G.					
P.G.					
Ph.D.					
<i>(Please use an additional sheet, if required, retaining the above tabular format)</i>					
<b>Ph.D.</b> (Mark ✓ in Appropriate Box)	<b>Degree Awarded</b> [     ]	<b>Thesis Submitted</b> [     ]			
<b>Title of Thesis/Dissertation</b> <i>(If Published, give details on a separate sheet)</i>					
Ph.D.					
M. Phil.					
P.G.					
Particulars of NET/SET/ SLET/GATE or Equivalent Exam.					

5. Present Position						Enclosure No.
Designation	University/ Institution	From Date	Basic Pay	Pay Scale/ Pay Band	Gross Pay/ Total Salary p.m.	

6. Teaching Experience as an approved full-time teacher/Accounting Auditing Experience of the Institutions If any.								Enclosure No.
Post Held	Basic Pay & Pay Band with A.G.P.	University/ Institution	Period		Teaching/ Accounting Experience			
			From	To	Y	M	D	

Total Teaching Experience/ Accounting Auditing Experience:  
**[\_\_Y(Years)][\_\_M(Months)][\_\_D(Days)]**

**Special contribution, if any:**

.....

.....

.....

*(Enclose additional sheet, if required, in the same format)*

7. Experience in Research Establishment / Institutions of Higher Learning / Industrial / Professional / Entrepreneurial								Nature of work	Enclosure No.
Post Held	Basic Pay & Pay Band with A.G.P.	University/ Institution	Period		Experience				
			From	To	Y	M	D		

Total Experience: **[\_\_Y(Years)][\_\_M(Months)][\_\_D(Days)]**

**Special contribution, if any :**

.....

.....

.....

*(Enclose additional sheet, if required, in the same format)*

<b>8. Research Experience:</b>							Enclosure No.
Number of Ph.D. Degrees Awarded under Supervision :				[     ]			
Number of Ph.D. Thesis Submitted under Supervision :				[     ]			
Number of Ph.D. Students Registered under Supervision :				[     ]			
<b>Total Research Experience:</b>			[     ]Y(Years)[     ]M(Months)[     ]D(Days)]				
<b>09. Publications:</b>							Enclosure No.
Number of Books Published		[     ]Own		[     ] Joint Authorship			
Number of Books Edited		[     ]Own		[     ] Joint Authorship			
Number of Papers Published		[     ]Own		[     ] Joint Authorship			
<b>Own</b>				<b>Joint Authorship</b>			
International Journals	National Journals	International Conferences/ Seminars/ Symposium	National Conferences /Seminars/ Symposium	International Journals	National Journals	International Conferences/ Seminars/ Symposium	National Conferences/ Seminars/ Symposium
[     ]	[     ]	[     ]	[     ]	[     ]	[     ]	[     ]	[     ]
<b>NOTE:</b> Give the details of Publications on separate sheet.							

<b>10. Administrative Experience</b>								Enclosure No.
Post Held	Basic Pay & Pay Band with A.G.P.	University/ Institution	Period		Administrative Experience			
			From	To	Y	M	D	
Total Administrative Experience:[     ]Y(Years)[     ]M(Months)[     ]D(Days)]								
<b>Special contribution, if any :</b>								
.....								
.....								
.....								
<i>(Enclose additional sheet, if required, in the same format)</i>								

<b>11. Experience of establishing Collaborations / Linkages at National / International level</b>							Enclosure No.
.....							
.....							
.....							
.....							
.....							
<i>(Enclose additional sheet, if required in the same format)</i>							

<b>12. Details about executed major Research / Consultancy / Industrial projects</b>									Enclosure No.
Sr. No.	Title of the Project	Name of Agency	Period	Type of Project (Research/ Consultancy / Industrial)	Whether Collaborative or Joint	Linkage at (National/ International University or Institution or Industry)	Grant/ Amount Mobilized (Rs. In Lakh)	Whether Policy Document /Patent as outcome	

<b>13. Evidence regarding knowledge in the field of Intellectual Property Rights</b>	Enclosure No.
.....	
<i>(Enclose additional sheet, if required in the same format)</i>	

<b>14. Academic Distinctions (Award/Scholarship/Rank, etc.):</b> <i>(Enclose additional sheet, if required, in the same format)</i>		Enclosure No.
(i)		
(ii)		
(iii)		
(iv)		

<b>15. Membership/Fellowship of learned Accredited Academic Bodies:</b> <i>(Enclose additional sheet, if required, in the same format)</i>		Enclosure No.
(i)		
(ii)		
(iii)		
(iv)		

<b>16. Additional Information, if any:</b> <i>(Use separate sheet, if necessary)</i>	Enclosure No.
..... ..... ..... .....	

<b>17. Name and Postal Address of Two Referees:</b>	
Referee 1	Referee 2
E-mail ID :	E-mail ID :
Mobile No. :	Mobile No. :

<b>18. Total No. of Enclosures attached:</b> _____
----------------------------------------------------

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

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

\_\_\_\_\_ (Name & Signature of Applicant)