

**Indo-US Science and Technology Forum**

**Document Checklist for Applicants**

Dear Applicant,

In order to successfully submit your application for the position of Head (Finance & Admin) at IUSSTF, please ensure that the documents listed below accompany your e-mail. If any documents are missing, your application will be deemed incomplete and not admissible. **This document checklist is for your reference and must be submitted along with your application.**

Check (√) each item that is to be included with your application and upload the documents in the order listed below.

\*Application in the prescribed IUSSTF application format (please mention the latest information first in a reverse-chronological order)

√√

\*Latest resume in the format of your choice (in a PDF or word document format not more than 2 pages)

\*Narrative document (not more than 1 page)

 \*This document Checklist

√

Any other relevant information/documents (Please feel free to add more spaces below)

Name of the Applicant:

Date:

The documents marked with (\*) are mandatory. Please download the formats/templates, fill them and send them to recruitments@iusstf.org along with soft copies of other relevant documents that you feel may support your candidature. Please ensure that the file size of all documents attached does not exceed 15 MB. The deadline for application submission is 15th April 2024, 06:00 PM Indian Standard Time.

 **APPLICATION FOR POSITION OF HEAD (FINANCE & ADMINISTRATION)**

Affix coloured Passport Size Photograph (Not more than three months old)

1. Name in full (starting with last name: :

Use BLOCK LETTERS and leave one

space blank after each part)

1. Parent’s / Spouse Name :
2. Date of Birth (DD/MM/YYYY) :
3. Nationality :

1. (i) Address for Correspondence :

(ii) Telephone No. : (**a) Office:**

**(b)** **Residence:**

(iii) Mobile No. :

1. **Educational Qualifications** :

(In chronological order, class XII onwards. Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SL NO** | **EXAM/DEGREE** | **UNIVERSITY/ INSTITUTION/ BOARD** | **YEAR OF PASSING** | **MAIN SUBJECTS TAKEN** | **SUBJECT OF SPECIALISA-TION** | **Div. / Class & % of Marks** |
| **I** |  |  |  |  |  |  |  |
| **II** |  |  |  |  |  |  |  |
| **III** |  |  |  |  |  |  |  |
| **IV** |  |  |  |  |  |  |  |

1. **Professional Certifications/Training/Achievements or Membership of Professional Associations:**

|  |  |  |  |
| --- | --- | --- | --- |
| **SL. No.** | **Organisation** | **Period** | **Details of Training** |
| **From** | **To** |
|  |  |  |  |  |

1. **Employment Record :**

(Details in chronological order, starting with the Current job. Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SL NO** | **Name & Address of the Employer Institution** | **Position Held****(Temporary /****Permanent)** | **Period** | **TYPE OF ORGANISATION (Central/State Government; Public Sector/ Private)** | **Present Scale of Pay/ Gross Pay** |
| **From**  | **To** |
| **I** |  |  |  |  |  |
|  | **Nature of Duties:**  |
| **II** |  |  |  |  |  |  |
|  | **Nature of Duties:** |
| **III** |  |  |  |  |  |  |
|  | **Nature of Duties:** |
| **IV** |  |  |  |  |  |  |
|  | **Nature of Duties:** |

1. Please provide names of two references (must not be related to you) who may be able to attest to your credentials and qualifications for the proposed appointment. Please indicate the nature of the relationship (Supervisor, Colleague etc.)
2. Name with full address and contact email ID/ Phone no:
3. Name with full address and contact email ID/ Phone no:

DECLARATION:-

I certify that the information provided above and in the documents submitted as part of this application is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time I am found to have concealed / distorted any material information, my appointment shall be liable to be summarily terminated without notice / compensation.

**Place:**

**Date: Signature of the Candidate**