**Kerala State IT Mission**

Saankethika, Vrindavan Gardens, Pattom, Thiruvananthapuram 695004, Tel: 0471 2525444

Affix Passport size photo

Name of Post :

Applicant name :

Age :

Date of Birth :

Gender :

Marital Status :

Permanent Address :

Address for Communication :

Mobile Number :

eMail ID :

Aadhar Number :

**Educational Qualification**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Sl No | Name of degree | Subject  or Stream | Course Type (Regular, Distant, Part time etc) | Institution | University/ Board | Course duration (specify year of enrollment and year of award of degree certificate) | Percentage/ GPA/ CGPA |
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**Additional Qualifications if any**

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| --- | --- | --- | --- | --- |
| Sl No | Course/ Certification | Specialization | Institution | Date of expiry of certificate, if any |
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**Experience**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Sl No | Organization | Designation | Job Role | Responsibilities | Period (specify month and year) | | |
| From | To | Total months |
|  |  |  |  |  |  |  |  |
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**Additional Skills, if any**

**Declaration**

The above mentioned facts are true and fair to the best of my knowledge and belief.

Place & Date Name & Signature