



**Indian Institute of Tourism and Travel Management**  
 (An Autonomous Body under Ministry of Tourism, Govt. of India)  
 Govindpuri, Gwalior– 474 011 (MP)

**Application form**  
 (for Direct Recruitment for 'Programme Assistant')

Please affix a recent  
 passport size  
 photograph

Advertisement No.

Post Applied for

**1. Full Name:**


2. i) **Marital Status:** Married  Single  ii) **Gender** Male  Female

iii) **Nationality:** .....

**3. Father's/Husband's Name (Strike out whichever is not applicable)**


4. **Category:** Gen.  OBC\*  SC\*  ST\*  PH\*

(\*Please attached certificate)

**5. Mailing Address:**


E-Mail:																			
Mobile No.:																			
Telephone					Office:					Residence:									

**6. Permanent Address:**


E-Mail:																			
Mobile No.:																			
Telephone																			



**8. Employment (Particulars of your past position(s))**

Employer	Position held	Period		Scale of Pay	Nature of Duties
		From	To		

(Please attached experience certificates)

**9. Special Awards/Honours received, if any**

Year	Name of award / honour	Name of organization

**10. Name & Address of two Referees (should be familiar with your recent work)**

	I	II
<b>Name</b>		
Occupation of Position		
Address		
Fax (if any)		
E-Mail		
Phone No. (with STD Code)		

**11. Statement of objectives (To be filled up in Candidate's own hand writing):**

.....  
.....  
.....

**12. Any other information which you may like to mention :**

.....  
.....  
.....

**Details of enclosures**

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

**Declaration**

I, hereby, declare that all entries in this form as well as attached sheets are true to the best of my knowledge and belief.

*(Signature of the Candidate)*

**Place :**

**Date :**

To be filled by the forwarding authority

The applicant has been working in this office/organization as ..... in the pay scale ..... since ..... and is still in service. We have no objection to his candidature being considered for the post he is applying.

Signature of the Head of Office : .....

Name: .....

Designation : .....

Address: .....

Place: .....

Date: .....