



**INDIAN INSTITUTE OF SCIENCE
BANGALORE – 560012**

**Application for the post of TEACHING ASSISTANT
in the Undergraduate Programme**

Name	:		
Father's / Husband's Name	:		
Date of Birth	:		
Category	:	General / OBC / SC / ST	
Gender	:	Male / Female	
Physically Challenged	:	Yes / No (If yes, specify nature – Blindness or Low Vision / Hearing Impairment / Locomotor Disability or Cerebral Palsy)	
Address	:		
Pincode	:		
State	:		
E-Mail ID	:		
Phone Number	:		
Educational Qualification Details :			
Examination Passed	Board / University	Year of Passing	Class secured (as declared by Board / University)

Any other Information :

DECLARATION

I, declare and affirm that the information furnished by me in the application form is true to the best of my knowledge & records and I have not concealed any information related to the above. I understand that if any of the above is found untrue or that I have concealed any information, my application or selection or offer stands cancelled and the Institute can take action against me which it deems fit.

Signature of the Applicant

Enclosures :

- 1) Photo copies of marks cards and degree certificate
- 2) Caste Certificate in case of SC/ST/OBC candidates
- 3) Medical Certificate in case of PH candidates