



**भारतीय प्रौद्योगिकी संस्थान कानपुर**  
**Indian Institute of Technology Kanpur**  
**अधिष्ठाता प्रशासन कार्यालय**  
**Office of Dean, Administration**

Date:

## Application for Ad-hoc Appointment

1.	Name of the candidate												
2.	Gender	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>								
3.	Date of Birth												
4.	Address												
5.	Mobile No.											E-mail ID	
6.	Category	Unreserved	<input type="checkbox"/>	OBC	<input type="checkbox"/>	SC	<input type="checkbox"/>	ST	<input type="checkbox"/>	Person with Disability	<input type="checkbox"/>		
7.	Applicant for the post of												

**Enclosure:** Candidate's bio-data (Form No: DOAD-IP-203), along with the self-attested relevant certificates.

Signature of the candidate

Project No.	
Salary Range	
Monthly consolidated salary (₹)	
Justification (if higher salary)	
Duration (Maximum 3 Months only)	From : _____ To: _____

Sl No.	Particular	Tick
1.	Candidate's Biodata	<input type="checkbox"/>
2.	Educational Certificate	<input type="checkbox"/>
3.	Experience Certificate	<input type="checkbox"/>
4.	Other relevant Certificate	<input type="checkbox"/>

Forwarded and Recommended

Signature of the Head/Faculty-in-charge/Officer-in-charge  
 Name:  
 Stamp:

## For DOAD Office Use

Qualifications matching the Designation	Yes : ( )	No: ( )		
Funds available	Yes : ( )	No: ( )		
Any other remark				
Project Expiry Date				
Dealing Assistant	Jr. Supdt./ Supdt.	Asst. Registrar (Admin.)	Deputy Registrar (Admin.)	Approved  Dean, Administration