



## APPLICATION FORM FOR THE POST OF “VARIOUS FACULTY POSTS”

(Notification no. **NIDMP/1-70/(25) Rectt.- Faculty/2026** dated 03.09.2026)

Appl. No. .... (\*To be filled by NID MP)

**Note:** Prospective candidates are advised to study the **Instructions** carefully and then fill up the application precisely and to the point in all respects. **Incomplete application will be summarily rejected.** Candidates may attach additional sheets, if required.

APPLICATION FORM FOR THE POST OF “.....”  
.....”

PREFERENCE ORDER: (\*Fill 1,2,3,4 in the appropriate box)

FOUNDATION STUDIES

COMMUNICATION DESIGN

INDUSTRIAL DESIGN

TEXTILE AND APPAREL DESIGN

Affix recent passport size colour photograph duly signed by the candidate across the photograph

### Application Fee Details: -

| DD No.: | Date: | Name of Bank: |
|---------|-------|---------------|
|         |       |               |

|    |                                             |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|----|---------------------------------------------|--|----------------------------------------------------------|----|------|--|--|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|--------|------|--|
| 1. | <b>Personal Information</b>                 |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|    | Name of Applicant                           |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|    | (in full capitals)                          |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|    | Father's Name                               |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|    | Mother's Name                               |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|    | Date of Birth                               |  | DD                                                       | MM | YYYY |  |  | Age (as on last date of submission of application)                                                                           | Years                                                    | Months | Days |  |
|    |                                             |  |                                                          |    |      |  |  |                                                                                                                              |                                                          |        |      |  |
|    | Gender                                      |  |                                                          |    |      |  |  | Marital Status                                                                                                               |                                                          |        |      |  |
|    | Nationality                                 |  |                                                          |    |      |  |  | Religion                                                                                                                     |                                                          |        |      |  |
| 2. | <b>Category</b> (*Tick the appropriate box) |  |                                                          |    |      |  |  | <input type="checkbox"/> General <input type="checkbox"/> OBC<br><input type="checkbox"/> EWS <input type="checkbox"/> SC/ST |                                                          |        |      |  |
|    | <b>Ex-Serviceman (Tick)</b>                 |  | <input type="checkbox"/> Yes <input type="checkbox"/> No |    |      |  |  | <b>PwD (Tick)</b>                                                                                                            | <input type="checkbox"/> Yes <input type="checkbox"/> No |        |      |  |



| 6. | <b>Details of Professional Experience in Teaching (In reverse Chronological order) (Attach extra sheet, if needed)</b> |                    |        |    |          |        |                                  |                            |                                            |                                    |
|----|------------------------------------------------------------------------------------------------------------------------|--------------------|--------|----|----------|--------|----------------------------------|----------------------------|--------------------------------------------|------------------------------------|
|    | Organization / Industry                                                                                                | Designation / Post | Period |    | Duration |        | Pay Band & Grade Pay / Pay level | Nature of Responsibilities | Temporary / Regular / Permanent Employment | Reason for Leaving (if applicable) |
|    |                                                                                                                        |                    | From   | To | Years    | Months |                                  |                            |                                            |                                    |
| a. |                                                                                                                        |                    |        |    |          |        |                                  |                            |                                            |                                    |
| b. |                                                                                                                        |                    |        |    |          |        |                                  |                            |                                            |                                    |
| c. |                                                                                                                        |                    |        |    |          |        |                                  |                            |                                            |                                    |
| d. |                                                                                                                        |                    |        |    |          |        |                                  |                            |                                            |                                    |

| 7. | <b>Details of Professional Experience in Industry/Any other (In reverse Chronological order) (Attach extra sheet, if needed)</b> |                    |        |    |          |        |                                  |                            |                                            |                                    |
|----|----------------------------------------------------------------------------------------------------------------------------------|--------------------|--------|----|----------|--------|----------------------------------|----------------------------|--------------------------------------------|------------------------------------|
|    | Organization / Industry                                                                                                          | Designation / Post | Period |    | Duration |        | Pay Band & Grade Pay / Pay level | Nature of Responsibilities | Temporary / Regular / Permanent Employment | Reason for Leaving (if applicable) |
|    |                                                                                                                                  |                    | From   | To | Years    | Months |                                  |                            |                                            |                                    |
| a. |                                                                                                                                  |                    |        |    |          |        |                                  |                            |                                            |                                    |
| b. |                                                                                                                                  |                    |        |    |          |        |                                  |                            |                                            |                                    |
| c. |                                                                                                                                  |                    |        |    |          |        |                                  |                            |                                            |                                    |
| d. |                                                                                                                                  |                    |        |    |          |        |                                  |                            |                                            |                                    |

| 8. | <b>Details of Present employment</b>               |  |                     |  |
|----|----------------------------------------------------|--|---------------------|--|
|    | Name of Organization / Institute                   |  |                     |  |
|    | Designation                                        |  | Date of Appointment |  |
|    | Brief nature of Work                               |  |                     |  |
|    | Whether Temporary / Regular / Permanent Employment |  |                     |  |
|    | Pay Level                                          |  |                     |  |
|    | Basic Pay                                          |  |                     |  |
|    | Gross Emoluments (Per Month) (in ₹)                |  |                     |  |
|    |                                                    |  |                     |  |

|      |                                                                                                                                                                    |      |               |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------------|
| 9.   | <b>Participation and contribution in national / international Plenary lectures / talks, conference attended, examinership etc. (Attach extra sheet, if needed)</b> |      |               |
|      | Participation Details                                                                                                                                              | Year | Title details |
| (i)  |                                                                                                                                                                    |      |               |
| (ii) |                                                                                                                                                                    |      |               |

|      |                                                                                 |          |              |      |                        |
|------|---------------------------------------------------------------------------------|----------|--------------|------|------------------------|
| 10.  | <b>Participation and contribution in relevant areas in higher education as:</b> |          |              |      |                        |
|      | Participated as                                                                 | Capacity | Organization | Year | Area of Specialization |
| (i)  |                                                                                 |          |              |      |                        |
| (ii) |                                                                                 |          |              |      |                        |

|      |                                                                               |       |               |
|------|-------------------------------------------------------------------------------|-------|---------------|
| 11.  | <b>Details of Publication: Contribution to Journals/ books/ publications:</b> |       |               |
|      | Publication Details                                                           | Years | Title details |
| (i)  |                                                                               |       |               |
| (ii) |                                                                               |       |               |

|     |                                                |        |
|-----|------------------------------------------------|--------|
| 12. | <b>International academic exposure, if any</b> |        |
|     | Year                                           | Detail |
| (i) |                                                |        |

|     |                                      |        |
|-----|--------------------------------------|--------|
| 13. | <b>Consultant experience, if any</b> |        |
|     | Year                                 | Detail |
| (i) |                                      |        |

|     |                                    |      |         |
|-----|------------------------------------|------|---------|
| 14. | <b>Honors / Awards won, if any</b> |      |         |
|     | Name of Honors / Awards Won        | Year | Details |
| (i) |                                    |      |         |

|     |                                                   |                                     |
|-----|---------------------------------------------------|-------------------------------------|
| 15. | <b>Number of Research Scholars guided, if any</b> |                                     |
|     | Year                                              | Research Scholar's guidance details |
| (a) |                                                   |                                     |

|     |                                                           |  |
|-----|-----------------------------------------------------------|--|
| 16. | <b>Write a para in about 100 words on your strengths:</b> |  |
|     |                                                           |  |



|                |                                                                                                             |                 |
|----------------|-------------------------------------------------------------------------------------------------------------|-----------------|
| <b>20.</b>     | <b>Details of Enclosures (Important: all the enclosures should be self-attested and serially numbered):</b> |                 |
| <b>Sl. no.</b> | <b>Description</b>                                                                                          | <b>Page no.</b> |
| a)             | Application Form                                                                                            |                 |
| b)             | Documents in support of Essential Educational Qualification                                                 |                 |
| c)             | Documents in support of Essential Experience Qualification                                                  |                 |
| d)             | Documents in support of other qualifications/ experience/ achievements                                      |                 |
| e)             | Documents in support of DoB                                                                                 |                 |
| f)             | Category Certificate (EWS/OBC/SC/ST) (if applicable)                                                        |                 |
| g)             | Ex-Servicemen Certificate (if applicable)                                                                   |                 |
| h)             | PwD Certificate (if applicable)                                                                             |                 |
| i)             | NOC from employer (if applicable)                                                                           |                 |
| j)             | Documents in support of all other qualifications                                                            |                 |
| k)             | Certificate by the Employer/Cadre Controlling Authority with enclosures (if applicable)                     |                 |

|                |                                                                                                |                          |                |                  |                          |
|----------------|------------------------------------------------------------------------------------------------|--------------------------|----------------|------------------|--------------------------|
| <b>21.</b>     | <b>References: (Min. 02 references from your previous University/Institute or Workplace/s)</b> |                          |                |                  |                          |
| <b>Sl. No.</b> | <b>Name &amp; Designation / Position</b>                                                       | <b>Organization Name</b> | <b>Address</b> | <b>Phone No.</b> | <b>Official Email ID</b> |
| (i)            |                                                                                                |                          |                |                  |                          |
| (ii)           |                                                                                                |                          |                |                  |                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------|
| <b>22. DECLARATION:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                            |
| <p>I hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that all entries in this form, as well as in the attached sheets, are true to the best of my knowledge and belief.</p> <p>I undertake that If the fact that false information has been furnished or that there has been suppression of any factual information in the Application Form comes to notice at any time during the service of a person her services would be liable to be terminated.</p> |  |                            |
| Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Signature of the candidate |
| Place:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                            |