Month Market Contraction of the
BUTTE OF TECHNOLS

Form No: DOAD-IP-202 Indian Institute of Technology Kanpur

Office of Dean, Administration

Report of Selection Committee

1. Project No.:

2. Advertisement No.:

- 3. Project Title:
- 4. Project completion date:
- 5. Date of Interview:
- 6. No. of Candidates: (a) Applied: (b) Called:

(c) Interviewed:

The Selection Committee recommends appointment of the following persons:

S1 No	Candidate Name	PF No. (if allotted earlier)	Date of Birth	Categ ory	Designation offered	Initial salary Rs. (consolidated)	Appointm
1.							
2.							
3.							
The Following newcone may be least on writing list							

The Following persons may be kept on waiting list

S1 No	Candidate Name	PF No. (if allotted earlier)	Date of Birth	Categ ory	Designation	Initial salary Rs. (consolidated)	Appointm
1.							

Names & Signatures of the Selection Committee Members

Declaration: Selection Committee has reviewed all the enclosures and verified.

1. Chairman _____

2. Member_____

3. Member _____

4. Member _____

Name and signature of Head/Faculty-in-charge/Officer-in-charge

- **Encls:** 1. *Uploaded Copy of Advt. on Institutes' website 3. Resume of Selected Candidates with enclosures
- 2. Approved Selection Committee and Advt. docs
- 4. Details of Candidates Called and Interviewed
- 5. Comparative Statement of Candidates Applied as per details overleaf

For DOAD Office Use

1. Validity of Term of Ap	pointment	Yes/No					
2. Remarks, if any.							
Recommendations of Selection Committee may be approved							
				Approved			
Dealing Assistant	Jr. Supdt./ St	apdt.	Assistant Registrar (Admin.)	Dean, Administration			

*Please note it is mandatory to upload the copy of Approved advertisement on the DOAD website without which the request for appointment will not be considered.

Note: This form is in accordance to the DFPRs 2018, dated 19th November 2018

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Summary of Candidate for the Post of _____

Shortlisting Criteria:

S1 No.	Applicatio n No. (if online applied)	Name, date of Birth, Current Place, Conder	Qualification: Exam Passed, Board/ University, Subject, Year of Passing, Percentage (in Chronological Order)	Experience: Post Held, Employer Name, Nature of Job, Duration of Employment (in Reverse Chronological Order)	Total Exp	Interview	Reason (for Called or Not Called)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Signatures of the Selection Committee Members.