



भारतीय प्रौद्योगिकी संस्थान इंदौर

खंडवा रोड, इंदौर 453 552

**Indian Institute of Technology Indore**

Khandwa Road, Simrol

Indore 453 552

**IIT Indore**

## JOINING REPORT

Date: \_\_\_\_\_

To,  
The Director,  
Indian Institute of Technology Indore,  
Khandwa Road,  
Simrol, Indore- 453552

Respected Sir,

With reference to the Offer Letter No. \_\_\_\_\_ dated  
\_\_\_\_/\_\_\_\_/\_\_\_\_ and my acknowledge thereof, I report for duty as \_\_\_\_\_ in the  
Discipline of \_\_\_\_\_ from the forenoon/afternoon of the \_\_\_\_\_  
under the mentorship of \_\_\_\_\_.

Yours Faithfully.

Name and Signature of Candidate

Name and Signature of PI

Signature of Head of the Department

Dean R&D



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(All columns are mandatory)

1. Name of the Student \_\_\_\_\_
2. Designation \_\_\_\_\_
3. Date of Joining \_\_\_\_\_ (FN / AN)
4. Project No and Name of PI \_\_\_\_\_
5. Department / Section \_\_\_\_\_
6. Date of Birth \_\_\_\_\_
7. Religion/Community \_\_\_\_\_  
(If belong to Minority Community) Yes / No
8. Category (GEN/SC/ST/OBC(NCL)/PH) \_\_\_\_\_ (Pl. attach copy of certificate)
9. Marital Status \_\_\_\_\_
10. Blood Group \_\_\_\_\_
11. Present Address \_\_\_\_\_
12. Permanent Address \_\_\_\_\_
13. Contact No. \_\_\_\_\_
14. Educational Qualifications (Pl. attach copy of certificate):

Qualification	Institute	Year	Percentage
10 <sup>th</sup>			
12 <sup>th</sup>			
Graduation			
Post-Graduation			
PhD			
Any other			

15. Father's Name \_\_\_\_\_
16. Mother's Name \_\_\_\_\_
17. Father's Contact No. \_\_\_\_\_  
(Mob. and email ID)
18. Dependents \_\_\_\_\_  
(If applicable as per IIT Indore health care rules)

I \_\_\_\_\_ do hereby declare that the information above is true. I also undertake to inform any changes in the above-mentioned information on occurrence of such change. I am fully aware that furnishing untrue information or suppressing of such change any information amounts to willfully furnishing wrong information and giving false declaration.

**Date**

**Signature of Research Staff/Fellow**



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**Details of Bank Account & PAN Card for  
crediting salary & other reimbursement**

1	Name of the Applicant	
2	Designation	
3	Date of Joining	
4	Department / Section	
5	Name of Bank	
6	Branch Name/Address	
7	S.B. Account No.	
8	IFSC Code	
9	PAN Number	
10	Aadhar card Number	

This information is furnished for transferring Salary / other benefits in my S.B. Account.

**NOTE: Copy of the front page of the passbook, PAN Card and Aadhar card duly self-attested shall be enclosed for verification and validation for activating the transfer**

Date \_\_\_\_\_

**Signature of the Applicant**