

INDIAN INSTITUTE OF CARPET TECHNOLOGY
Under the aegis of Development Commissioner (Handicrafts),
Ministry of Textiles, Govt. of India Chauri Road, Bhadohi-221401 (U.P.)

#### Walk -in -interview

Applications are invited for faculty position (contractual) for session 2025-26. Walk-in-interview will be held on 24.09.2025 (10:30 am onwards). For more information, kindly visit <a href="https://www.iict.ac.in/">https://www.iict.ac.in/</a>.

**Director, IICT** 



## **Indian Institute of Carpet Technology (IICT)**

Under the aegis of Development Commissioner (HC), Ministry of Textiles, Govt. of India Chauri Road, Bhadohi -221401(UP)

### Walk -in -interview

(For making a panel of guest faculty members)

Application are invited (in prescribed format) for engagement of guest faculty in following subjects for the academic session 2025-26:

- 1. Engineering Physics/ Engg. Physics Lab/Idea to Business Model
- 2. Fundamentals of Electrical Engg./Basic Electrical Engg. Lab
- 3. Fundamentals of Mechanical Engg.
- 4. Soft Skills/ Technical Communication/ Constitution of India/English Language Lab/ Essence of Indian Tradition & Knowledge
- 5. Fundamentals of Electronics Engg./ Basic Electronics Engg. Lab
- 6. Sports/Yoga
- 7. Python Programming
- 8. Engineering Chemistry/Engg. Chemistry Lab.

Essential qualification will be followed as per AICTE, New Delhi norms. The payment of remuneration will be made as per institute rules. Duly filled application along with essential documents is to be sentthrough mail (<a href="mailto:ictdmc@rediffmail.com">ictdmc@rediffmail.com</a>) latest by 22.09.2025 (5:00 P.M.) and interview will be held on 24.09.2025(10:30 A.M. onwards).

**Director, IICT** 



# **Indian Institute of Carpet Technology**

(Under the aegis of Development Commissioner (HC), Ministry of Textiles, Govt. of India) Chauri Road, Bhadohi -221401(U.P.)

> Self attested photo

# **Application Form for Guest Faculty**Session-2025-26

	Note: To be filled by the candidate		Category: GEN/OBC/SC/ST
1.	Name: (Block Letters)	2. Date of Birth:	
3.	Father's/Husband's Name:	4. Nationality:	
5.	Whether belongs to: SC / ST / OBC  (Please tick (✓). Enclose the certificate issued by competent authority)	6. Phone / Mobile	No.:
7.	Address for Correspondence		
8.	Permanent Address		
9.	Email Address		
10.	Are you physically disabled (PD)? (Yes/No) (If yes, enclose certificate issued by Chief Medical Officer)	11. Name of State (landidate belongs:	Domicile) to which

12.	Educational Qualification						
S. No.	Examination Passed	Univ	ard / versity itution	Year of Passing	Specialization	Division& % of Marks	Remarks
a)	High School						
b)	Intermediate						
c)	Graduate BA/BSc/BE/BTech						
d)	Post Graduate MA/MSc/MTech						
e)	Ph.D.						
f)	Other						
	er NET/GATE qualified: You've details	es/No					
13.	Experiences Teaching/Industrial		Teaching(UG Level)				
			Teaching(PG Level)				
			Professional				
			Industry				
			Research		rch		
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14. List of publications [Separate sheet(s) may be enclosed]:

I hereby declare	that the entries	made in the	form are tr	ue to the	best of my
knowledge and belief	and if found in	correct/wrong l	later, I shall	be liable	to lose my
employment atwhateve	er stage it is found	<b>.</b>			

Place	• • • • • • •
Date	