



LBS CENTRE FOR SCIENCE AND TECHNOLOGY

(A Government of Kerala Undertaking)
Nandavanam, Palayam, Thiruvananthapuram - 695 033, Kerala
Phone: 0471 - 2324396, 2324148, 2324101; Fax: 0471 - 2337055
Email: director.lbs@kerala.gov.in; Website: www.lbscentre.kerala.gov.in

Notification for the post of Principal for the Polytechnic College at LBS Institute of Technology for Women on Contract Basis

B2/1425/2024 Dated: 15/06/2024

Applications are invited for the post of Principal for the Polytechnic College at LBS Institute of Technology for Women on Contract Basis from the retired Principals of Government Polytechnic Colleges. Those who are interested may submit applications to the Director, LBS Centre for Science & Technology in the prescribed format along with the copies of certificates on or before 22/06/2024. Scanned copies of the same may also be emailed to director.lbs@kerala.gov.in.

Contact No. 0471-2560302, 0471-2324101

AN E.

Dr M.Abdul Rahiman Director

<u>Application for the post of Principal, Polytechnic at LBS Institute of Technology for Women on Contract Basis</u>

(Only the Retired Principals from Government Polytechnic Colleges need to apply)

1	Name of the (in BLOC							Affix Passport Size Photo
2	Sex			4) Marital Sta (Give √mark)		Married		Unmarried
2	a)Age			,		DD	MN	I YYYY
3	(as on 01/06/2024)		b) Date of birth					
4	Father's Name							
5	Mother's Name							
	Correspondence	Address:		Permanent Ac	ddress:			
6								
7	Contact No (Mob):			Email ID:				
8	Educational Qualification(From Highest Qualification)							n)
	Name of the Degree Specialisation		Name of the University Name of			Institute		
			Δtts	ach additional s	heets if	required		
9	Details of Promotion to the post of Principal (Attach copy of Orders)		Date			Institute		
10		Experience	ce (III cili	onological Ord	er) (Atta	ach copy of	Certif	icates)
10	Name of Organisation		Post	onological Orde				icates) of work
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10	Organisation		Post		iod]		
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	Any other Qualification		Post Atta Details	Per ach additional s	iod heets if	required.	Nature	
11 12 a	Any other Qualification Number of Intern	ational Journ	Post Atta Details nal Public	Per additional si	iod heets if	required.	Nature	
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e	Details Funded projects undertaken				
Attach additional sheets if required.					

I hereby declare that all the statements made in this application are true and complete to the best of my knowledge. If at any stage of the selection process the above statements are found to be false or incomplete, I understand that my candidature will stand cancelled. Relevant copies of certificate are attached for proof for age, qualification and experience.

Date:	
	Signature: