NATIONAL INSTITUTE OF WATER SPORTS

(A Centre under Indian Institute of Tourism and Travel Management)

(An Autonomous Body under Ministry of Tourism, Govt. of India)

Aivavo, Near Dona Paula Circle Caranzalem, Panjim, Goa - 403002

Application form for the Post of Instructor (Watersports) and Pool Lifeguard

(To be filled by the applicant and produce at the time of reporting)

Post Applied for: _____

Please affix a recent passport size photograph

1. **Full Name**:

2. i) **Marital Status**: Single ☐ Married ☐

   ii) **Gender:** Male ☐ Female ☐

   iii) **Nationality**: ……..

3. **Date of birth** (in figures)

4. **Age as on the date of closing date of application: ……years …….. Months……Day…….**

5. **Father's/Husband's Name (Strike out whichever is not applicable**)

6. **Mailing Address:**

E-Mail:		
Mobile No.:		
Telephone with STD code	Office:	Residence:

7. Permanent Address:

E-Mail:																						
Mobile No.:																						
Telephone with STD code			Office:												Residence:							

8. Educational Qualification:
(Please attach photo copies of certificates/Mark Sheets)

Examination	Branch / Specialization	College / Univ./Inst.	Year of Passing	%age of marks	%age / Grade

9. Certification in Watersports/Scuba Diving/ Lifeguard courses: (Please attach photo copies of certificates)

Examination Passed	Name of Institution	Year of passing	Course duration	Subject	%age / Grade

10. Details of trainings undergone: (Please attach photo copies of certificates)

Organization	Course	Period of training		Level	Remarks
		From	To		

11. Details of employment in chronological order. Enclose a separate sheet, duly authenticated under your signature, if required:-

Name of the organization where employed	Posts held on regular basis	Period of service		Scale of Pay	Nature of Duties
		From	To		

12. Present Employment (if any):-

Designation:	
Whether Permanent/ Temporary/Contract	
Organization	
Total Emoluments (Per month) (Rs.)	

17. Any other information which the Applicant may like to provide for consideration :

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Declaration

I, hereby, declare that all entries in this form as well as in the attached sheets are true to the best of my knowledge and belief.

(Signature of the Candidate)

Place :

Date :
