



Placement Participation Form

Please fax, email or post completed form to
30, Jai Jawan Colony II, Tonk Road, Jaipur - 302018

Fax: +91-141-2546037
Email: sourav@cmfraj.org
lata@cmfraj.org
Cell: 94142 22232

Name of the Organisation: _____

Contact Person: _____

Designation: _____

Address for Communication: _____

Phone: _____

Fax: _____

Email: _____

Job Details

| Job Description | Location of Posting | Tentative No. of Offers |
|-----------------|---------------------|-------------------------|
| | | |

Duration of Training (if any): _____

Do you wish to conduct a Pre-placement presentation: Yes/No

Please suggest a suitable date(s) for PPT: _____

Equipment required for PPT: OHP

Slide Projector

Computer/LCD

Any Other: _____

Mode of Selection

| Procedure | Yes/No |
|------------------|--------|
| Preliminary Test | |
| Interviews | |

Details of Compensation Package

| | During Training | On Confirmation |
|--------------|-----------------|-----------------|
| Gross Salary | | |
| Other Perks | | |

Date:

Name: _____

Designation: _____

Signature: _____