

RECRUITER RESPONSE FORM

Please complete the form in all respects and post it to the Director at the address shown above.

ORGANISATION PARTICULARS:

Name:

Address Line 1:

Address Line 1:

Address Line 1:

Address Line 1:

City / Town: District:

State: PIN:

Phone: (.....) URL:

CONTACT PERSON PARTICULARS:

Name:

Designation:

Phone (Office): (.....)

Mobile:

Email:

PREFERRED MONTH / DATE FOR CAMPUS RECRUITMENT:

AREA OF SPECIALISATION REQUIRED:

- Human Resources Marketing Finance General Management

ANY MINIMUM ACADEMIC CRITERIA REQUIRED TO BE FULFILLED?

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