

SATYAM FASHION INSTITUTE, NOIDA Affiliated to S.N.D.T. Women's University, Mumbai

## Job Announcement Proforma 2017

A) COMPANY PROFILE						
Name of the Company						
Company's Website						
Specialisation Area						
Market Served (in terms of coverage)						
Annual Turnover (in INR)						
B) CONTACT DETAILS						
Name of the Personnel						
Designation						
Telephone Number						
Mobile Number						
E mail Address						
C) PLACEMENT SCHEDULE The interviews/ short-listingprocesses can be scheduled between 09:30 am -04:30 pm. Please tick the week and mention date/s when you wish to conduct your interviews)						
Duration   Batches Available   Venue   Date of Visit   Time of Visit						
Round 1 20.03.17 - 24.03.17 FD, PGFD, LA, TD SFI Campus						
Round 2 24.04.17 - 28.04.17 FD, PGFD, LA, TD SFI Campus						
If you require to hold any pre-placment talks, please specify your schedule below:						
Do you require the resume of the participating students for short-listing prior to interview? Yes  No						



## D) DETAILS OF JOB (Help us to know your requirements!)

Programmes	Specialisation	No. of Students Required	Job Description	Gross Salary	Place of Posting	
B.Des.	Fashion Design					
	Lifestyle Accessories Design					
	Textile Design					
P.G. Diploma	Fashion Design		l			
	•	•				
Choice of S	Selection Process					
Personal In	terview   Shortlistin	g on the basis o	f resume $\square$	Group Dis	cussion 🗌	
	any other requirements	s in terms of skil	ls, please spec	ify		
•			1	.1.7	C . 1	
their final e 2. All the ap the intervie addressed t 3. The cor payments,	tudents shall be availabe examinations and graduce oppointment letters shall ew is to be conducted in to the institute. The institute oppointment undertakes that TDS and other incentives ing place for women.	ation shows. be issued by the n the employing ute will avail the it will comply	company in the organisation of confirmation lower with all laws	ne institute itse the call letter etters to the co , regulations,	lf. In case, es shall be mpany. rules for	
Name:		Signature:				
Designation:				,		
	The completed	I form may be se	ent to the insti		as below: IFNT CFII	

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Emailed to the following:

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