FORMAT OF APPLICATION

Serial Number : (For office use only)

Affix colored Passport Size Photograph (Not more than three months old)

1. Advertisement No.:
2. Post for which applied :
3. Name in full (starting with last name : in BLOCK LETTERS leaving onespace blank between two parts of name)
4. Parent's / Spouse Name :
5. (a) Date of Birth: DATE MONTH YEAR
(b) Age on closing date : DAYS MONTHS YEARS
6. Whether you belong to (please tick : SC ST OBC Handicapped and if yes, attach certificate) !! !!
7. Educational Qualifications : (In chronological order from matriculation onwards. Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient)

SL. NO.	EXAMS. PASSED	UNIVERSITY / INSTITUTION / BOARD	YEAR OF PASSING	MAIN SUBJECTS TAKEN	SUBJECT OF SPECIALISA- TION	DIV. / CLASS & % OF MARKS
						5
				20	12	
					5.	



::2::

8. Employment Record:

(Details in chronological order, starting with the first job)

(Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient)

S.No	Name & Address of Employer/ Instt.	Post / Fellow ship / Associateship held	Ad-hoc / regular/ temp. / permanent	Period		Total period	Scale	Nature
				F R O m	То	of each employment in years, months & days	of pay	of duties
							e j	

- 9. Total experience in years after Essential Qualification:
- 10. Details of research work / experience, if any : (Annexure, if any, should not exceed 200 words)
- 11. Specialisation:

(With reference to experience desired for the post)

12. Professional Training:

SL. NO.	ORGANISATION	PEI	RIOD	DETAILS OF TRAINING
		From	TO	
	i i			- (a)
				 ≥ ≥
			Σ)	



::3::

13. Present Employment Status:

UNDER UNDER CENTRAL STATE GOVT. GOVT.		UNDER AUTONOMOUS BODY	PUBLIC UNDERTAKING	OTHERS	
			* 11		

14. Nationality:
15. Religion:
: Pin Code :
(ii) Telephone No. : (a) Office :
(b) Residence:
(c) Mobile:
(d) e.mail:
17. Nearest Railway Station :
18. Present Pay :
zo. resent ray :
(i) Scale of Pay :
(Revised / Pre-revised)
(ii) Basic Pay:
(iii) Other allowances :(excluding HRA & CCA)
(Please mention the nature of allowances ; DA –whether Govt/Industrial)
(iv) Total Salary :
[(ii) + (iii)]

Boh

19. Give	e below	the names	of two	reference	s (they	must no	t be relate	ed to	you)
who are	e in a po	sition to te	stify from	m their p	ersonal	knowledg	ge as to ye	our fit	tness
for the	propose	ed appointr	ment. Th	ney must	be per	sons und	ler whom	you	have
worked	or studie	ed.							

- (i) Name with full address with telephone number:
- (ii) Name with full address with telephone number:
- 20. (i) Service to which the candidate belongs:
- (ii) Complete address of the cadre authority with phone No. :

21. Permanent Address:	
(in BLOCK LETTERS):	
Pin Code:	

Telephone Number:

22. Any other information you may wish to add: [Like list of publications, Membership of: learned societies, awards and recognition,: etc. (in brief)]:

- 23. Details of Enclosures:
- 24. DECLARATION:-

I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time I am found to have concealed / distorted any material information, my appointment shall be liable to be summarily terminated without notice / compensation.

Place:

Date:

Signature of the candidate

Boll

::5::

CERTIFICATE

(TO BE GIVEN BY THE HEAD OF ORGANISATION / OFFICE)

Certified that the particulars have been verified and found to be correct. It is also certified that no disciplinary / vigilance proceedings are either pending or contemplated against the officer. Integrity of the officer is also certified.

Place : Date :

> Signature of the Head of the Organisation / Office with Office Seal

> > Abh