## **Proforma for Application**

Appli	cation f	or the post of			Recent
rr		r			pass-port
					size
					photograp
1	Date	of Advertisement:			
2	Name	e in full beginning with surname	(in bloc	k letters):	
3	Fathe	er's name:			
4	Natio	onality:			
5	Marit	tal Status: (married, single, widow	wer or w	vidow)	
6	Date	of birth (in Christian Era) (in fig	ures):		
7	Addr	ess for correspondence with e-ma	ail, Mob	oile number and PIN Code:	
8	Do y	ou fall in any of the following ca	tegories	:	
	(a)	Scheduled Caste	:	Yes / No	
	(b)	Scheduled Tribe	:	Yes / No	
	(c)	Ex-defence Personnel	:	Yes / No	
	(d)	OBC	:	Yes / No	
	(e)	Physically handicapped: (specify which type of PH)	Yes	<sup>'</sup> No	

## 9 Educational History:

Name of	Exam / Degree	Year of	Main Subject	Marks %age
Institution / Board		Passing	with %age of	aggregrate and
/ University			marks in each	Division

10.	Profes	sional 7	Training:						
	Organ	nizatior	1	P	eriod		Detai	ils of Training	
11.	Emplo	yment	records (Detail	s in chro	onological	order, starting	with fi	rst job):	
	Name	e &	Period of	Desig	gnation	Description o	of	Whether	Reason of
	addre		service	_	scale of	work	-	permanent	leaving
	emple	oyer /	From - To	pay)				or	
	instit	ution						temporary	
11 (A)	. Detail	s of exr	perience in the	followir	ng fields:				
11 (11)		-			18 1101001				
	(i)		nistrative Expe			:			
	(ii) (iii)		ational Experie ct Experience	nce		:			
	, ,	_	_			·			
12	Details	s of pre	sent employme	nt:					
	(i)	Desig	nation of the p	ost held		:			
	(ii)	Date	from which hel	d		:			
	(iii)		of the pay of the		1	:			
	(iv)		her present pos ar / tenure / de						
			basis and sinc		1 01	:			
	(v)		deputation, det			:			
			gular basis / sc when	ale of pa	ay and				
	(vi)		of the organiz	ation w	ith full	:			
	` '	addre	ss indicating na	ame and	[				
			nation of the co		erson and				
	(vii)	-	one / fax numb ory of the Orga		n·				
	(111)		overnment / St						
		(b) P (c) P	SU / Autonomo	ous Bod	lies				
13.	Provid	. ,		f remun	neration in	your last / prese	ent job	:	
			_				-		
	(i) (ii)					y per month: tely):			
	(iii)								

	(iv)	Next increment due on:	
14.	Resun	ne of Research work / expe	prience, if any, (one set of reprints be furnished, if available)
15.	Field	of special interest:	
16.			bligation to serve the Central / State Government / any other Public us Body? If so, please furnish full details.
17.		e and address of two personsional competence:	ons (not relatives) to whom reference can be made regarding your
18.		page write-up on analyzing advertisement.	your experience with reference to the functions / activities described
19.		her applying on Direct Recu ansfer (i.e. absorption basis)	
20.	Any o	other information you may	wish to add:
22.		nration: I shall, if and wh IT assignments anywhere is	en required, take temporary / permanent duty in the discharge of n India or abroad.
	een cond	cealed / distorted. If at a	on is correct and complete to the best of my knowledge and nothing any time, I am found to have concealed / distorted any material ble to be summarily terminated without notice or compensation.
inforı	een cond nation; n	cealed / distorted. If at a	any time, I am found to have concealed / distorted any material
infori Place	een condition; n	cealed / distorted. If at a ny appointment shall be lia	any time, I am found to have concealed / distorted any material
infori Place	een condition; n	cealed / distorted. If at a my appointment shall be lia	any time, I am found to have concealed / distorted any material ble to be summarily terminated without notice or compensation.  Signature of the candidate
infori Place Date:	een condition; n	cealed / distorted. If at a my appointment shall be lia	any time, I am found to have concealed / distorted any material ble to be summarily terminated without notice or compensation.  Signature of the candidate Name:
infori Place Date:	een condition; n	cealed / distorted. If at a my appointment shall be lia	any time, I am found to have concealed / distorted any material ble to be summarily terminated without notice or compensation.  Signature of the candidate Name:
infori Place Date:	een condition; n	cealed / distorted. If at a my appointment shall be lia	any time, I am found to have concealed / distorted any material ble to be summarily terminated without notice or compensation.  Signature of the candidate Name:
infori Place Date:	een condition; n   To be fill  fied that  i)	cealed / distorted. If at a my appointment shall be lia	Signature of the candidate Name:  PART – II  uthority in the case of Candidates who are presently working in at / PSUs / Autonomous Organizations)  bove by the officer is correct ry proceedings are either pending or contemplated against the above  Signature:  Name:  Name:
inform Place Date:	een condition; netion; netion; netion; netion; netion to be fill fied that i) ii)	cealed / distorted. If at a my appointment shall be lia	Signature of the candidate Name:  PART – II  uthority in the case of Candidates who are presently working in at / PSUs / Autonomous Organizations)  bove by the officer is correct ry proceedings are either pending or contemplated against the above  Signature:  Name:  Name:  Designation:  Department /
infori Place Date:	een condition; netion; netion; netion; netion; netion to be fill fied that i) ii)	cealed / distorted. If at a my appointment shall be lia	Signature of the candidate Name:  When the case of Candidates who are presently working in at / PSUs / Autonomous Organizations)  Bove by the officer is correct ry proceedings are either pending or contemplated against the above Signature:  Name:  Name:  Name:  Designation: