APPLICATION FORM FOR COMMISSION IN THE TERRITORIAL ARMY FOR NON DEPT (INF) TA

1. Candidate's Name																							p th	tteste hotogi ne can	raph o	Э		
(To be filled in I Certificate attack)				LS	in blu	ie ba	ll poi	nt p	en. Ir	n cas	se o	f va	riati	on i	n N	lame a	s give	n to	Matr	ic				ize 4.ξ Γο be			5	
2. Father's Name																												
	Hous	e No									Τ					Block/	Pkt											_
	Villag	ge/To	wn													Post C	Office											
Permanent Address	Tehs	il													_	Distric												
	State														_	Pin Co									\vdash			
		le No								-					_	Land L		0.							\vdash			
	Hous									-	-				-	Block/ Post C					H				\vdash	_		_
4. Present Address Tehs		Village/Town Tehsil								-					-	District									$\overline{}$			_
		State										H			_	Pin Code												_
	Mobile No														_	Land Line No.											_	
4 (A) Choice of	writter	n exar	n ce	ntre												·II (Luc										_		_
						one-l one-										· IV (Pu	ine-06	, Ba	ngal	ore-C)7, Ja	aipu	r-08	& H	/dera	aba	d-09)	1
Note : Candida	tes are	requ	ired	to f	ill up	their	choi	ce c	of cer	itre a	as p	er th	neir	res	pec	tive Zo	one on	ly.		1		17						
Note : Domicile other residentia													cop	y o	r pa	issport	/arıvın	g IIC	ense	/rati	on ca	ard/\	voter	י טטו	ard	or a	any	
5. Date of Birth	as Ma	atric C	Certif	icat	:e (6. Ge	ende	r								7. N	lo. of a	atten	npts	alrea	ady n	nade	e in :	SSB	for :	_		
Day Month Year					(Strike out which ever is not applicable)									7. No. of attempts already made in NDA														
<u> </u>				MIF										CDSE														
																		Т	Ά									
8. Educational	Qualif	icatio	n	9	. Edu	catio	nal S	Strea	am 1							10. 1	Vation	ality										
Code : Gradua	tion	_ (∩1	_	`odo	: Arts	S = 0	1 0	ciono	·o –	02																	
Post G			-	C	comn	nerce	- 03	3, Eı	ngine	erin	g –																	J
11. Marital Sta	tus ·					al – (ext o		1BA	- 06	& A	ny c	othe	r – ()7	_	12 (a)	Name	of I	next	of ki	n							_
Single/Married/		ed		'											12 (a). Name of next of kin													
(Strike out whichever n					Code: Father – 01, Mother – 02, Wife- 03,																							
13. Nature of e	mploy	ment	:	Son – 04, Daughter – 05 & Other - 06 14. Details of previous Commissioned Service in the Armed Forces (Furnish Dis												char	harge/Release											
Write code						cate)														`								_
Employment C	`odo			(8	a) Se	ervice)								(Code :	Army	-01,	Air F	orce	e-02,	Nav	vy-03	3, TA	٠-04			
Central Govt/Unio		tory -	01																									
State Govt/Sen			02																									_
Self Employed		-	03	(t	o) Ca	atego	rv						С	ode	: O	Officer-	01. JC	O/F	auiva	alent	-02.	OR-	-03					_
Pvt Sector		-	04		,		- ,												7		,							
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				(0	c) Ra	ai iK																						
				(1	d) Δr	my/S	Servic	:e			T		I		T	1		1				T		1				
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				(6	e) A	rms/s	Servi	се																				
15. Reason for	Disch	arge	(writ	e co	ode)																							-
Code : Med Bd O	ut-01, \	/olunt	ary D	isch	narge-	02, D	iscipl	inar	/ Gro	und-(03, C	On S	uper	ann	uati	on-04,	& Any	Othe	r-05									_

DECLARATION TO BE SIGNED BY CANDIDATE

- (a) In the event of my selection for commission in the Territorial Army, I am willing to serve anywhere in India for longer duration also, whenever required, or as per the rules and orders in force from time to time.
- (b) I clearly understand that if at any time during the period of probation I am not found suitable, I shall have to resign my commission in accordance with the rules and orders in force from time to time and in case I decline to do so I am liable to be discharged/removed from the Territorial Army.
- (c) I am fully aware that if it is found at any stage that I have knowingly furnished any details which is/are false or have suppressed material information or I fail to comply with the above undertakings, my candidature will be rejected summarily and if already commissioned, I shall be liable to be discharged/removed from the Territorial Army.

Signa	ture o	f Witness	Signature of Applicant
Name)		Name
Addre	ess of \	Witness	Address
		ne No	Mobile/Phone No
Date .			Date
17.	(2)	CENTRAL GOVT/UNION GOVT DULY AUTHENT	ERED BY CANDIDATES EMPLOYED IN FERRITORY/STATE GOVT/SEMI ICATED BY HEAD OF OFFICE
	(a)		for the last yrs and that his character
	-	r as known to me is good. He i	s/is not recommended for the grant of commission
	(b)	It is also certified that Shri	will be made
			vice of the Territorial Army as and when required.
			ridoes not foreseeable future a key–post in
	(Dep Depa subs	artment/Organisation which cou artment/Organisation. However, equently the Additional Directo	uld affect the minimum essential functions of this in the event of this becoming a key man or General Territorial Army, New Delhi shall be discharge him from the Territorial Army.
Place			Signature
Date _			Designation
			Stamp/Seal of Office

18. <u>CERTIFICATE TO BE RENDERED BY SELF EMPLOYED PERSONNEL TO BE AUTHENTICATED BY GAZETTED/COMMISSIONED OFFICER/DM</u>

	<u>RECOI</u> (To be	Signature Designation Stamp/Seal of Office MMENDATION OF INTERVIEW BOARD AT COMMAND completed by Presiding Officer Preliminary Interview Board) Not Recommended for Commission in the Territorial Army.
	·)	Signature Designation
	·)	Signature
Place		
	provident fund cto. 1	
	Name an employee of this of the Territorial Army. (b) On return from will be absorbed in the in the civil had not be benefits in his civil	between the civil and military pay and allowances of the applicant S/o
Certif	fied that :-	
19.		RENDERED BY CANDIDATES EMPLOYED IN PRIVATE TO BE AUTHENTICATED BY HEAD OF OFFICE)
		Stamp/Seal of Office
Date_		Designation
Place)	Signature
	louge and solicit field	s/is not recommended for the grant of commission in the TA.
know	ledge and belief. He is	