

Application for Consultant in ATM Discipline for
(Please Specify Location)



- (i) **Name** : _____
- (i) **Date of Birth** : _____
- (iii) **Date of Retirement** : _____
- (iv) **Designated Post on Retirement** : _____
- (v) **Address for Correspondence** : _____

- (vi) **Contact No.** Landline : _____
Mobile : _____
- (vii) **Email ID** : _____

(viii) **Academic Qualification (In reverse order, starting from the latest):**

Sl No.	Degree	Year		Stream/ Subjects	University	Class / Division (if any)
		From	To			

(ix) **Relevant Experience: (please enclose relevant documents)**

- (a) Year-wise tasks / highlights of similar nature carried out during relevant experience period with all details including employer, position held & pay-scale.

Sl. No.	Organization	Post Held with Basic Pay	Year		Total period of Experience	Responsibilities Handled
			From	To		

- (b) Vigilance / Disciplinary Clearance Certificate from previous employer and Last Pay certificate to be enclosed along with the application form.

Place: _____

Signature: _____

Date: _____

Name: _____

Disclaimer:

The above information furnished by the applicant are true and correct. Any discrepancy reported at later date may lead to cessation of work agreement / contract.

Undertaking

I, hereby acknowledge that I have read all the clauses of notification and accept the same.

I, hereby agree to consider my application as Consultant in ATM Discipline (Level E7/E6) if found suitable by the Selection Committee of AAI based on my eligibility.

I, hereby submit my willingness to be engaged as Consultant in ATM Discipline (Level E7/E6) as decided by AAI if selected.

Name: _____

CONSENT FORM

(to be filled two months prior to separation)

I, Smt./Sh. _____ working as _____

(Designation and Level) at _____ (Station/Place of Posting)

is superannuating on _____ (Date).

I do hereby give my consent that I am willing to work as Consultant with AAI after my superannuation w.e.f. _____ (Date from when the employee is willing to take up consultancy with AAI).

Signature : _____

Date : _____

Place : _____

To,

RED / ED(ATM) at _____ (place)