## **ANNEXURE-3**

		the post of				in	
	_		•••••	on	deputation basis at A	Affix here	
1.	. Name and address in BLOCK letters						
						recent	
						passport	
						size	
						photograph	
2.	Father's Na	ame					
3.	Date of Bir era)	Birth (in Christian					
4.		irement unde ate Governme					
5.	Educationa	al	i)				
	Qualification	on					
			ii)				
			iii)				
			iv)				
6.	Whether educational and other qualifications required for the post are satisfied (if any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same).						
				Required	Possessed by th	Possessed by the Applicant	
	Essential						
	Desirable						
7.				in the light of entries mad requirements of the post	е		

8.		Details of employments (in chronological order) enclose a separate sheet, duly authenticated by your signature if the space below is insufficient.								
-	S. No	Name of the Office/Institute/Organization)	Post Held	Duration of Experience		Total Duration of Experience	Pay-band and Grade pay (Scale of Pay if in pre-	Nature of Duties		
				From	То	Year(s), Month(s), day(s)	revised scale of pay)	Danes		
	1.									
	2.									
	3.									
	4.									
	5.									
		Total work experience in required Grade Pay:		Year(s)		Month(s)	•••••	Day(s)		

9.		of present employment (i.e.ad-hoc or temporary or permanent)				
10.	In case the present employment is held on deputation/contract basis, Please state: (a) the date of initial appointment (b) period of appointment on deputation/contract (c) name of the parent office/organization to which you belong					
11.	Additional details about present employment please state whether working under: (a)Central Government (b)State Government (c)Autonomous Organization (d)Government undertaking (e)University					
14.	Are you in revised scale of pay? If yes, give the date from which the revision took place and also indicate the pre-revised scale.					
13.	Total emoluments per month now drawn.					
14.	Additional information, if any which you would like to mention in support of your suitability for the post. Enclose a separate sheet, if the space is Insufficient.					
15.	Whethe	er belongs to SC/ST/OBC (if yes, please specify)				
16.	Cont act	1) Office				
	Nos.	2) Residence				
		3) Mobile				
		4) E-mail address				
17.	If selec					
		Signature of the Candidate	Candidate's Address:			
Date	:					
Cour	ntersigne	d:				
		[Employer/Authorized Officer]				