Office of the Comptroller and Auditor General of India

Application Form For Consultant (Statistics)

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1. Name :

2. Father's Mother's Name :

3. Date of birth :

4. Gender :

5. Nationality :

6. Present Address (for : Communication)

7. Email id :

8. Contact No. : Landline:

Mobile No.:

9. Academic Qualifications (in reverse order, starting from the latest)

SI. No	Degree	Year	Subjects	University/ Institute	Class/ Division	Percentage of Marks
1						
2						
3						
4						

10. Professional Qualifications (in reverse order, starting from the latest)

SI. No	Degree	Year	Subjects	University/ Institute	Class/Di vision	Percenta ge of Marks
1						
2						
3.						

- 11. List of relevant Technical and Academic publications
- 12. Relevant experience
 - a) Total No. of years of experience and name of organization(s)
 - b) Year-wise tasks of a similar nature carried out during the last three years.

Declaration

I declare that the above information is true and correct to the best of my knowledge and belief. I am aware that in case of misrepresentation or a materially false declaration, it shall render me liable to action according to applicable law. I also understand that the application is liable to be rejected and/or the engagement cancelled in case a discrepancy is detected at any stage before completion of the engagement. The completion certificate may also be recalled should such a contingency arise after the engagement period.

	Signature	
Date:	Name	
Place:		
Required Enclosures: Proof of	(i) DOB (ii) Educational Qualifications [Clearly indicating tha	t

the applicant has got 65% or above marks at Graduation and Post-Graduation (Statistics)

Levels] (iii) Experience (iv) Address