CENTRAL ADOPTION RESOURCE AUTHORITY

PROFORMA FOR APPLICATION

	s (by transfer on deputation on forei	ign service terms)
		Photo of Applicant to be pasted here
1.	Name (in Block Letters)	
2.	Father's/Husband's Name	
3.	Date of birth and Age (as on closing date of Advertisement)	
4.	Gender	
5.	Postal Address with Contact No. & e-mail	
	(i) Office	
	(ii) Present Residence	
	(iii) Home Town	
6.	Date of entry in Govt. Service	
7.	Date of superannuation as per	
' '	existing applicable rules	
8.	Substantive post held in the Paren	nt Department on regular basis :
	(a) Name of the post	
	(b) Name of the Organisation	
	(c) Status of the Organisation	
	(Attached/Subordinate Office of a	
	Central Govt. Ministry; or Central	
	Autonomous Organisation	
	/Central Public Undertaking of a	
	State Govt./UT	
	(c) Administrative Ministry/Deptt.	
	(e) Pay-Band on regular basis since (f) Pay-in-pay band at present	
	(g) Present Grade Pay on regular	
	basis since	
	(h) Basic Pay at present Ad'hoc	
	/regular) (Plz. Mention – Regular	

or after getting MACP)

	(i) Nature of duties (Actual in details)	
9.	Present Post held (if on deputation	n):
	(a) Name of the post	
	(b) Name of the Organisation	
	(c) Status of the Organisation	
	(d) Pay Band	
	(e) Pay-in-pay band	
	(f) Grade Pay	
	(g) Basic Pay	
	(h) Period during which the post	
	held (fromto)	
	(i) Nature of duties performed	
	(Actual in details)	

10.	Details of pas	t service(s)				
S.N.	Organisation	Post	Pay	Grade	Period	Duties/responsibili
			Band/	Pay	From to	ties(Actual in
		Pay Scale		details)		

11.	Essential and relevant qualifications										
S.N.	Examination passed/	Year of passing	Board/University								
	name of degree										
(i)											
(ii)											
(iii)											
(iv)											

12.		<u>-</u>	ns and relevant experience and or administrative) with
S.N.	Type of experience	Year(s)/ period of	Institution(s) from which such
	(Actual in details)	experience	experience obtained
i.			
ii.			
iii.			

13.	Additional information, if	
	any, which you would like to	
	mention in support of your	
	suitability for the post.	
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Declaration:

I declare that all the information in my application is true. I fulfill the criteria (essential qualifications, experience and required number of years of qualifying service in the substantive post/grade pay on regular/continuous basis in the feeder grade) for the post as advertised.

Signature of the	he candidate
Name	
Place:	Date:

Note: If the existing Pay Scale of the applicant is other than 7^{th} CPC, a clear match with Pay Matrix of 7^{th} CPC may be indicated with proof.

TO BE FILLED BY FORWARDING OFFICE OF THE APPLICANT

Office							
Category of Office Place	Central Ministry	Departmer	Attached Office		Central Autonomous Body	State Govt.	Other
Tick(√)							
Present Post							
pay Level (Pay at p:/regular)	nent to grade pay : resent Ad' Plz. Mentar or a	the or	sent Pay Band	Present Grade Pay , Pay Level o Pay Matrix	f the pay Lev	ding pa	ıy in
-	-						
the Cadr	e Control that all th	ling Autho e informati	rity.	ed by the ap	t he Authorize		

Ce	rtified that	all the	inforn	nation	mention	ed by the	applic	ant in his a	pplica	tion
as	mentioned	above	have	been	verified,	including	work	experience,	from	the
rec	cords and fo	und to	be co:	rrect.						

It is also	certified	that	Sh./Ms		ha	s bee	n w	orking as
		in	his/her	substantive	post/grade	pay	on	regular/
continuous	s basis w	7.e.f						

He/She fulfills the eligibility criteria (essential qualifications, experience and required no. of years of qualifying service in the substantive post/grade pay on regular/continuous basis in the feeder grade) for the post as advertised.

Signature with date (Authorized Signatory) Designation: Office Seal Phone/Mobile: Fax: E-mail