

PROFORMA OF APPLICATION FOR THE POST OF OFFICE SUPERINTENDENT IN LEVEL 6 OF PAY MATRIX (7TH CPC) AGAINST 20% LDCE QUOTA IN ECoR/HQ/BBS.

I do hereby volunteer for selection to the post of Office Superintendent in Level-6 of Pay Matrix (7th CPC) as notified vide PCPO/BBS's letter No. ECoR/Pers/NG(Admn)/02/Selection/OS/LDCE/V/20, dated 00.00.2020, duly accepting all the terms & conditions and other details mentioned in the notification. I confirm that my personal/Service details are as follows:

1	Name of the employee in full (Block Letters)		
2	Father's / Husband's Name		
3	Date of Birth		
4	a)	Date of Initial Appointment	
	b)	Capacity on Initial Appointment	
	c)	Scale of Pay on Initial Appointment	
5	Community (UR/SC/ST/OBC)		
6	Present Department/HQ/Unit in which working		
7	Working under (Controlling Officer)		
8	Present Designation	a) Substantive	
		b) Officiating	
9	Date of Regular Entry as Jr.Clerk-cum-Typist/ Sr.Clerk-cum-Typist	a) Jr.Clerk-cum-Typist	
		b) Sr.Clerk-cum-Typist	
10	Educational Qualification (As per entry in SR)		
11	Other Qualification, if any.		
12	Lien Department / Unit		
13	PF Account No		

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14	a) Contact Number/Mobile No.		
	b) Email ID		

I do hereby declare that I have gone through the above referred notification and I am volunteering for the post of Office Superintendent after agreeing to abide all the conditions in the said notification. I am aware that my application will not be considered if it is deficient in any form or incorrect or not forwarded by the controlling officer/department/division/unit to PCPOs' office. In case, anything is found to be incorrect, I shall be responsible and my candidature may be cancelled.

Date

Place

(Signature of the employee)

Certified that the above employee submitted the application before the cutoff date in this office.

Date:

(Signature of Controlling Officer)
With seal

Certified that the above service particulars are found correct as per the service record maintained in this office.

(Signature of Cadre Personnel Officer)
With seal