ANNEXURE-I

Application for the post of				
1.	Name of Applicant: (in Block Letters):			
2.	Advertisement No.:	Paste		
3.	Date of Birth:	Dhotoough		
4.	Nationality:	Photograph		

- 6. Central/State/PSU/etc.;7. Designation:
- 8. Pay Scale (Pay level):

5. Parent Organization:

- 9. Date of retirement under: Central/State Government Rules:
- 10. Educational Qualifications:

Qualifications Graduation onwards	Discipline	Subjects	Percentage of marks obtained	Year of passing
Graduation				
Post-Graduation				
Doctorate				
Others				

- 11. Qualification:
- 12. Specialization:

(if any qualification has been treated as equivalent to the one prescribed in the Rules, state the authority for the same)

13. Details of Employment, in chronological order.

Office/Institution	Post held	From	То	Scale of pay	Nature	of
				and basic Pay	duties	

- 14. Details of Required Experience
- 15. Important work handed/achievements
- 16. Nature of present employment i.e. Contract or Adhoc or Temporary or Quasi-permanent or Permanent:
- 17. In case the present employment is held on deputation/contract basis give details:
 - a. the date of initial appointment
 - b. Period of appointment on deputation/contract
 - c. Name of the parent office/organization to which you belong and type of organization (Central Govt./State Govt./Autonomous Bodies/others

18. (i) A	Address for correspondence			
(in E	BLOCK LETTERS)	: :		
				
		Pin Code:		
		Mobile No.:		
		Email:		
19. Perm	nanent Address	1		
(in E	BLOCK LETTERS)	:		
		Pin Code:		
Cont	tact Number	t		
20. Deta	ails of Enclosures :			
	ANNEXURE	E-II		
(To be atta	ched with the application)			
T	000 11 1	formation given in this application are true		
and correct, made by m	, I also fully understand that if at any stag	e it is discovered that any attempt has been e facts, my candidature may be summarily		
Place:		(Signature of candidate)		
Date:				
Date.	ANNEXURE	-TTT		
(Certificate	e to be furnished by the Employer/Head	of Office/Forwarding Authority)		
Certified th	at:			
(i) (ii)		/Kmare correct. e, either pending or contemplated, against		
(iii)	(iii) The up-to-date Annual Confidential Report dossier in respect of Shri/Smt./Kmis enclosed herewith/there is no practice of maintaining Confidential Report of employees in this Organization/Institution (Please strike off whichever is not applicable)			
Place: Date:		Signature of Head of Department/ Forwarding authority Name: Department. Office.		