

APPLICATION PROFORMA

1. Name of the Candidate (in capital) & FMS No. :
2. Father's/Husband's Name :
3. Name of the Institute where the candidate is working at present :
4. Date of Birth & Age (as on date of circulation) :
5. Gender (M/F) :
6. Postal Address :
7. Mobile No. :
8. Email ID :
9. Date of initial appointment on Direct Recruitment :
10. Functional Group :
11. Present Basic Pay with Level of Pay :
12. Whether belongs to SC/ST/OBC/Ex-SM/PH :
13. Category (UR/OBC/SC/ST/PH) on which initial appointment was made :

14. Educational Qualification :

| Exam passed | Board/University | Year of Passing | Subjects | Percentage of marks |
|-------------|------------------|-----------------|----------|---------------------|
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Contd....P/2

15. Reason for Transfer (Please specify – Max 100 words and attach necessary documents, if any)

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| <p>a. Spouse ground (whether employed in ICAR/ State Govt./Central Govt./ Autonomous Body/ PSUs, Certificate as per ICAR letter No. F.No. TS-19(01)/2002-Estt.IV dated 19.3.2020 may be enclosed)</p> <p>b. Medical ground (self or any family members : family as defined under CGHS/CS(MA) Rules (Certificate as per ICAR letter No. F.No. TS-19(01)/2002-Estt.IV dated 19.3.2020 may be enclosed)</p> <p>c. Length of service in difficult areas (Certificate as per ICAR letter No. F.No. TS-19(01)/2002-Estt.IV dated 19.3.2020 may be enclosed)</p> <p>d. Other, if any (Give details)</p> | |
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16. Details of Technical/Other Qualifications :
(if any)

17. Service Details including Present Post :

| Name of the Institute | Post Held | Scale of Pay | Period | | Nature of Duties Performed |
|-----------------------|-----------|--------------|--------|--|----------------------------|
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Declaration

I _____ hereby declare that all the statement made above are complete and correct to best of my knowledge and belief. In the event of any information found false or incorrect at any time, action may be taken against me. I shall abide by the decision of the Director, ICAR-IIWM, Bhubaneswar.

Date:

Signature of the Candidate

Certificates to be furnished by the Head of Office

1. Certified that the information furnished above are verified from the service records of the candidate and found correct and further certified that no disciplinary action has been taken, initiated or being contemplated against the employee.
2. Vigilance Clearance Certificate
3. CRs/APARs of last five years (Attested Photocopies)

Signature with Seal of the Head of Office