ANNEXURE

PARLIAMENT OF INDIA LOK SABHA SECRETARIAT (ADMINISTRATION BRANCH-I)

APPLICATION FORMAT

[For filling up of the post of Secretariat Assistant on deputation basis]

 2. 		n Block Letters) 'Husband's Name	:					Affix recent attested passport size photograph
3.	Mother's	Name	:					
4.	Nationali	ity	:					
5.	Address							
	(a)	For communication	n:					
	(b)	Permanent						
ó.	Present of	ffice address	:					-
	Telephor	ne/Mobile No.	:		e-mail	l:		_
7.	(a) D	ate of Birth	:					_
	(b) A	ge as on the last date	of rece	eipt of applic	ation:	(years)	(months)_	(days)

8.	Date of superannuation :		(month)	(year)
9.	Category (SC/ST/OBC/EWS/GEN	1):			
10.	Details of service (please attach	sepa	arate sheet, if required)	:	

Sl. No.	Name of the Organisation	Post held	Scale of pay#		Served From -	Length of	Whether regular	Nature of duties performed
1101	0.8		Pre- revised	Revised	То	service	or not	portormon
(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)	(ix)

[#] Details of revised/re-structured scale (s) of pay prior to 01.01.2016 or thereafter.

During the eligibility period:

Post held	Basic pay	Grade Pay	Level in Pay Matrix	Served From To

11. Educational qualifications (including professional/ technical qualifications, if any): (*Please attach separate sheet, if required*).

Sl. No.	Exam passed	Institute/ University	Subjects studied	Year of passing	% of marks

12.	Any other relevant information :
13.	DECLARATION:
	I declare that I fulfil the eligibility conditions as per the Advertisement No.1/2020/AN-I and that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage or not satisfying the eligibility conditions according to the requirements mentioned in the said Advertisement, my candidature/appointment is liable to be cancelled/terminated.
	Signature of the candidate
Dlago	
Place:	
Date:	

<u>VIGILANCE AND INTEGRITY CERTIFICATE</u> (To be given by the Head of Office of the applicant)

- 1. It is certified that the particulars furnished by the applicant are correct. She/he possesses the requisite 02 (two) years experience in performing duties which are of Clerical/Data Entry in nature and this has been certified in the enclosed proforma.
- 2. It is certified that no disciplinary/vigilance case is pending against the applicant and she/he is clear from the vigilance angle.
- 3. Her/his integrity is certified.
- 4. It is certified that no minor/major penalties have been imposed on the applicant during the last ten years or during the period of her/his service, whichever is more.
- 5. Copies of Annual Confidential Reports (ACRs)/Annual Performance Appraisal Reports (APARs) for the last 02 (two) years <u>or</u> upto 05 (five) years, whichever is more, are enclosed.
- 6. It is certified that in the event of selection, the officer will be relieved of her/his duties immediately and she/he shall not be allowed to withdraw the candidature.

Signature of the forwarding authority
Name:
Designation:

Note:

Application form not accompanied by complete and up-to-date attested copies (on each page) of ACRs/APARs for the last 02 (two) years or upto 05 (five) years, whichever is more, alongwith Vigilance and Integrity Certificate and Experience Certificate (enclosed Proforma) will be summarily rejected and no correspondence relating thereto will be entertained.

Proforma

EXPERIENCE CERTIFICATE

This is to certify that Ms./Smt./Shri		(N	ame	of	the
Candidate) Designation	is	w	orking		in
		(Name	O	f	the
Organization).					
2. During her/his service in		· · · · · · · · · · · · · · · · · · ·	(Name	e of	the
Organization) she/he gained experience in performing duties	which	are of	'Cleri	cal/[Data
Entry'.					
PLACE:					
Date:					
(SIGNATURE OF THE COMPET	ENT IS	SSUING	AUTH	HOR	ITY)
Name:					
Designation:					
Office Name, Address and Officia	l Stam	p/Seal:			