

MMMOCL APPLICATION FORM

To, The Managing Director,

Maha Mumbai Metro (M3) Operation Corporation Ltd. 4th Floor, NaMTTRI Building, Adjoining New MMRDA Building, Bandra-Kurla Complex, Bandra (E), Mumbai - 400051. Maharashtra. Please affix passport size photograph and signacross

TO BE FILLED IN BOLD ENGLISH CAPITAL LETTERS BY THE CANDIDATE ONLY

CANDIDATES ARE ADVISED TO FILL UP THE DETAILED INFORMATION IN THE PRESCRIBED FORMAT AND AT RELEVANT PLACE ONLY. NO SEPARATE SHEET ATTACHED WILL BE CONSIDERED.

| 1. | Notification Date | | | | | | | | | | |
|-----|--|------------|-----------|------------|-------------|------|--------|------------|-----------|------|-----|
| 2. | Name of the Post | | | | | | | | | | |
| 3. | Sr. No. of the Post | | | | | | | | | | |
| 4. | Mode of Selection (Please Tick) | 1 | Nominat | tions | | | Г | Deputation | on | | |
| 5. | Name of the Candidate | First Name | | | Middle Name | | | Surname | | | |
| 6. | Date of Birth (DD/MM/YYYY) | | | | | | | | | | |
| 7. | Age (as on date mentioned in notification) | | Year | s | | Mo | nths | | | Days | |
| 8. | Nationality | | | | | | | | | | |
| 9. | Gender (Male / Female) | | | | | | | | | | |
| 10. | Marital Status (Married / Unmarried) | | | | | | | | | | |
| 11. | Religion | | | | | | | | | | |
| 12. | Caste | | | | | | | | | | |
| 13. | Caste Category (Please Tick only one category) | OPEN | OBC | SC | ST | VJ-A | NT-B | NT-C | NT-D | SBC | EWS |
| 14. | Caste certificate issued by Maharashtra State / Other State* | | | | • | • | | | | | |
| 15. | Applied for Horizontal | Women | n Reserv | ation | | | Person | with D | isability | | |
| 13. | Reservation (if any) | Merito | rious Spo | orts Perso | on | | Orpha | n child | | | |
| 16. | Mobile Number | | | | | | | | | | |
| 17. | Alternate Mobile Number | | | | | | | | | | |
| 18. | Email ID | | | | | | | | | | |
| 19. | Correspondence Address | | | | | | | | | | |
| 20. | Permanent Address | | | | | | | | | | |

^{*}Note – Candidate submitting Caste Certificate of other state will not be considered for reserved category posts.

21. Academic& Professional Qualifications acquired (As on date mentioned in notification):

| Sr. No. | Academic & Professional Qualification | Year of Passing | Duration of course in years | Percentage / Grade | Board / University / Institute |
|------------|---------------------------------------|--------------------|-----------------------------|-----------------------|--------------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |

22. General & Job Specific work experience gained as under (As on date mentioned in notification):

| Sr. No. | Name of Organization | Designation / Position | Pay Band/CTC Rs. with pay scale under | Nature of Duties performed | Period (DD/MM/YYYY) | | Total Experience | | ence |
|------------|--------------------------------------|------------------------|---|----------------------------|---------------------|----|------------------|--------|------|
| NO. | Organization | / Fosition | IDA/CDA | | From | То | Years | Months | Days |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| | Total Experience (Years-Months-Days) | | | | | | | | |

Note - Need detailed information i.e., post held at each stage during the total tenure. For each post one separate row will be filled up in the above table. If space is not sufficient then separate sheet can be added.

| 23. | Whether appeared for interview in MMMOCL inpast(ifyes,mentionthe details of post applied for and date) | |
|-----|---|----------|
| | | |
| 24. | Parent Organization Name, address, Phone No. & Competent Authority, | |
| 25. | Whether one copy of application has been senttoParentOrganizationwellin advance | YES / NO |
| 26. | Present Pay Scale with GP (details along with 6 th /7 th Pay Commission and CDA / IDA / Other Scale, if any) or CTC (For private organization) | |
| 27. | Present Basic, GP with Designation held | |
| 28. | Present employer's name, address, phone number & Name of key person | |
| 29. | Whether Departmental Enquiry, if any is pending, proposed, initiated against you in last 10 years. | YES / NO |
| 30. | Whether your Parent Organization will relieve you in case if you are selected on Nomination / Deputation? If so, the maximum period required for joining the duties on Nomination / deputation, by complying all necessary formalities | YES / NO |
| 31. | Whether you have applied to Competent Authority for issue of NOC (in the format attached) | YES / NO |
| 32. | WhetheryouhaveappliedtoCompetent Authority for issue of Last five years Performance Appraisal | YES / NO |
| | | 1. |
| 33. | Hobbies /Interests | 2. |
| | | 3. |
| 34. | Names of two reputed references except political and relatives preferably Gazetted Officers in the Class One rank | 1. |
| | | 2. |
| 35. | Date of return from earlier deputation & Name of organization, (in case of deputation candidates | |
| | | |

36. Details of deputation during the entire service till date:

| Name of the organization | on Post held Pay Scale Period | | | Remarks, if any | | |
|--------------------------|-------------------------------|------------------------------------|--|-----------------|--|--|
| | | | From | То | Total | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Name of the organization | Name of the organization Post held | Name of the organization Post held Pay Scale | | Name of the organization Post neid Pay Scale | Name of the organization Post neid Pay Scale |

37. Enclosures in support of statement duly self-attested (Strike out whichever not applicable)

| Sr. | Details of attached documents | Attached (Pleas | No. of copies | | | |
|-----|--|-----------------|---------------|--|--|--|
| No. | betains of attached documents | Yes | No | | | |
| 1. | Age Proof (Birth Certificate / SLC) | | | | | |
| 2. | Academic & Professional Qualifications (Passing certificate necessary) | | | | | |
| 3. | Experience Certificates of all organizations where worked. Experience certificate clearly showing field of experience as mentioned in notification. Vague experience certificate will not be considered. | | | | | |
| 4. | NOC issued by Parent Organization | | | | | |
| 5. | Caste Certificate & Caste Validity | | | | | |
| 6. | Current Organization Appointment Letter & Pay slip | | | | | |
| 7. | Other supporting documents | | | | | |
| | Total number of copies attached | | | | | |

DECLARATION:

I hereby declare that all the statements made by me in this application form are true and correct to the best of my knowledge and belief that nothing has been concealed or suppressed. I have enclosed necessary documents/certificates to this effect. I also understand that in case, any of my statements is found untrue during any stage of recruitment and thereafter. I shall be disqualified for the post applied for and I shall be liable for any penal action.

I have read the advertisement and the relevant GRs mentioned hereinabove and made aware myself about all the terms & conditions stipulated therein and affirm to abide by them. I affirm I fulfill the requisite criteria that that no any Departmental Enquiry is live/pending/proposed against me as on today. I further affirm that there are No Dues, No Legal Proceedings of any nature are pending against me as of date.

| Date: | |
|--------|---|
| Place: | Signature of candidate with name & date |

(To be given on Company's letterhead)

Date:

To,
Managing Director,
Maha Mumbai Metro (M3) Operation Corporation Ltd.
4th Floor, NaMTTRI Building, Adjoining New MMRDA
Building, Bandra-Kurla Complex, Bandra (E),
Mumbai - 400 051. Maharashtra.

No Objection Certificate

| This is to certify that Shri/Smt./Kumari this office from | | | |
|---|----------------------------------|----------------|-------------|
| (r | | | |
| having present basic is Rs | | | |
| | | | |
| record, his/her date of birth is | | | |
| | | | |
| Further it is certified that he/she has ap | plied for the post of | in | MMMOCL |
| on deputation/nomination basis and we four | nd him/her is entitled to the sa | id post as per | prevailing |
| norms of deputation. He / She fulfills the quali | fication, experience and prescri | bed criteria a | s specified |
| in the advertisement as per recruitment rules | for the said post in MMMOCL. | | |
| | | | |
| We ensure that if he/she selected, we will spare th | ne services of Shri/Smt./Kum | | |
| within 3 | 0 days. | | |
| | | | |
| | | | |
| We also certify that No Departmental Enquiry penalized in the last 5 years. | is pending, initiated, proposed | and he/she r | never been |
| perialized in the last 5 years. | | | |
| This NOC is issued on his/her request. | | | |
| | | | |
| Place: | | | |
| Date: | Authorized Signatory | , | |
| | Name | | |
| | Company seal with add | | |
| | Phone No. / Email II |) | |

DECLARATION FORM

(See Rule 4)

| Shri/Smt./Kum | | |
|---|---|-------------------------------|
| Son/daughter/wife of Shri | | |
| Agedyears, resident of | | |
| | | |
| | | |
| District | City | - |
| Do hereby declare as follows: | | |
| 1) That I have filled my application for the post o | f | |
| | | |
| 2) I have (Number) of living children as on today | | |
| , | | |
| Out of which No. of children born after 28 ${ m N}$ | March 2005 is | - |
| Data of Birth of shildren who have often 20 N | 40 velo 2005 | |
| Date of Birth of children who born after 28 M | 1arch 2005 | _ |
| | | |
| | | |
| 3) I am aware that, if any total no. of living children | is more than two due to the children born after 2 | 8 th March 2006, I |
| am liable to be disqualified for the same post. | | |
| | | |
| | | |
| | | |
| Place: | | |
| Date: | | |