

APPLICATIONFORM Young Professional - I (Contract basis)

AFFEX
RECENTPASSPO
RTSIZESIGNEDP
HOTOGRAPH

Name of the Position: YP-I

1. Name of the Candidates (Block letters) :
2. Father's/Husband Name :
3. Sex : Male Female
4. Date of Birth :
(Please attach documentary proof)
5. Age as on date of Notification : Year.....Month.....Days.....
6. Marital Status :
7. Permanent address :
.....
.....
8. Correspondence address :
.....
.....
9. Educational Qualification :
(Please attach photo copy of related certificate) starting from Matriculation/10th&onwards:

| Sl. No. | Name of the Examination Passed | Subjects | Name of Board /University | Year of Passing | % of Marks |
|---------|--------------------------------|----------|---------------------------|-----------------|------------|
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10. Experience (particulars of all previous and present employment) if any: - (Please attach documentary proof)

| Sl. No. | Name of the Organization | Post/ Position held | Period(from & upto) | Emoluments | Remarks |
|---------|--------------------------|---------------------|---------------------|------------|---------|
| | | | | | |
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| | | | | | |

11. E-mail Id: Mobile:

12. Any other Information relevant information:.....

DECLARATION

I here by declare that all the statements made above are true, complete and correct to the best of my knowledge and belief. I also declare that

- (i) Intheeventofanyinformationbeingfoundfalse/incorrect/ineligibilitybeingdetectedatanytimebefore or after selection, action may be taken against me and I shall be bound by the decision of the employer.
- (ii) I further declare that I have read the Advt. carefully and I declare that I fulfill all the conditions of eligibility regarding age limit, educational qualifications etc., prescribed for the contractual engagement.

Date :
Place:

Signature of the applicant
Name: