PROFORMA

APPLICATION FOR THE POST OF AT ICAR-NIASM, BARAMATI

	ne of the candidat	•	:				
	ne of the institute						
	olicant is presently	•	:				
	e of appointment	•					
4. Wh	ether Permanent o	or Tempo	rary:				
Bas	sis in the present p	ost					
5. Dat	e of birth and age		:				
6. Edu	cational Qualifica	tions	:				
Sr.no	Name of Exam Passed		Board/Institution			Year	
1	*:						
2							
3	8						
8. Full 9. Cor	ether SC/ST/OBC Postal Address ntact Number vice Particulars	: : :					
	Name of the Institute					Nature of duties performed	
	of the Institute	Post held	d Scale of pay	Period			
	of the Institute	Post held	d Scale of pay	Period from	to	Nature of duties performed	
	of the Institute	Post held	d Scale of pay		to		_
	of the Institute	Post held	d Scale of pay		to		
Name	of the Institute		,		to		_
11. Any I and tru or inco	y other informatic do herebue to the best of r	on to the A by declare my knowler before o	Application: and certify that edge and belief. or after the select	the inform	nation fu		e
11. Any I and tru or inco	y other information do herebue to the best of reported at any time	on to the A by declare my knowler before o	Application: and certify that edge and belief. or after the select	the inform	nation fu	performed rnished above is correctinformation found false	e
11. Any I_ and tru or inco	y other information do herebue to the best of reported at any time	on to the A by declare my knowler before o	Application: and certify that edge and belief. or after the select	the inform	nation fu nt of any n may be	performed rnished above is correctinformation found false	e I

Certificate to be furnished by Head of Office

Certified that the information furnished by the candidate has been verified from the office/service records and found correct. It is certified that no vigilance/disciplinary case is pending/contemplated against the above candidate. Attested copies of last 5 years APARs enclosed.