

APPLICATION PROFORMA FOR LOWER DIVISION CLERK IN LEVEL-2 AT ICAR-NATIONAL INSTITUTE FOR PLANT BIOTECHNOLOGY, NEW DELHI (ON INTER-INSTITUTIONAL TRANSFER BASIS):

1.	Name of the applicant & (FMS No.)				
2.	Father's/Husband's Name				
3.	Gender: Male/Female				
4.	Date of Birth & Age				
5.	Date of Joining of ICAR				
6.	Name of ICAR Institute where applicant is working at present				
7.	Date of Joining of the Present Grade and Status of probation				
8.	Whether Permanent/Temporary				
9.	Nature of duties performed (in brief)				
	Sl.No.	Post Held	Period	Pay Scale	Nature of duties
10.	Educational Qualification				
11.	Whether belongs to UR/SC/ST/OBC/ Physically handicapped & selected under with category (UR/SC/ST/OBC/PH)				
12.	Email Address (preferably ICAR email ID i.e @icar.gov.in) and Mobile No.				

13.	<p>Reason for transfer: (Pl. Specify- Max 100 words and attach necessary documents, if any)</p> <p>a. Spouse ground (Whether employed in State Gov./Central Gov./PSUs. If yes, please attach copy of self attested ID proof issued by the department where spouse is working).</p> <p>b. Medical ground (Self or any family members: Family as defined under CGHS/CS (MA) rules).</p> <p>c. Other (Give details)</p>	
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I do hereby declare that the particulars furnished by me are correct to the best of my knowledge and belief.

(Signature of the applicant)

Date: -----

It is certified that particulars furnished above have been verified from the service book and found correct and no disciplinary case is either pending or being contemplated against the official.

Signature of the Head of Office
(With Stamp)