APPLICATION FORMAT FOR THE POST OF WHOLE-TIME MEMBER IN TELECOM REGULATORY AUTHORITY OF INDIA (TRAI), NEW DELHI

(If space is insufficient against any item, please attach extra papers/sheets).

1.	Name	(in	block	letters)	:

First Name:	Space for coloured
Middle Name:	photograph duly signed by candidate
Last Name:	90

- 2. Father's Name:
- 3. Marital Status:
- 4. Date of Birth (Please attach a copy of High School Certificate):
- 5. Age as on 30.09.2020:Years......Months......Days
- 6. Name of Service of the candidate and total service in HAG or above Scale (for serving/retired Govt. servants):
- 7. Nationality:
- 8. Address for correspondence (in block letters) indicating clearly the PIN Code:
- 9. Permanent Address (in block letters):
- 10. (a) Telephone and Fax Nos. (Off./Resi.):
 - (b) Mobile:
 - (c) e-mail ID:
- 11. Whether belonging to SC/ST/OBC:

(Please attach a copy of Caste Certificate)

12. Educational Qualifications (in reverse chronological order):

Name of	Degree	Year of	Division/	Academic	Subject /
University/		passing	% of	Distinction	Specialization
Equivalent			marks		i e
Institution	Hi:		obtained		
			/ -		
			u.		

13. Employment Record (in chronological order starting with present post, list in reverse):

Name & Designation, scale of address of pay and whether		Period of service		Nature of work/	
employer	regular/ deputation/	From	То	experience	
		7			

- 14. Information related to special knowledge of, and professional experience acquired in respect of matters relating to telecommunication, industry, finance, accountancy, law, management or consumer affairs, including length of experience:
- 15. Publications, if any, in journals of national/international repute, with citation and index.
- 16. Awards/honours, if any:
- 17. Any other relevant information:

18. Declaration: -

I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. If at any time, I am found to have concealed/distorted any material information; my appointment shall be liable to summary termination without notice.

Signature of the Candidate	Signati	ure o	of t	he C	andi	date
----------------------------	---------	-------	------	------	------	------

Date:

Place:

(Note: Please attach self-attested copy of all relevant certificates.)

TO BE FORWARDED BY THE HEAD OF ORGANISATION/INSTITUTION

(IN RESPECT OF CANDIDATES WORKING UNDER GOVERNMENT/AUTONOMOUS / STATUTORY / PUBLIC SECTOR UNDERTAKINGS ETC.)

Ministry/Department/Office of	
Particulars furnished by reference to service records and their corr	have been verified with ectness certified.
It is certified that no vigilance case is either above officer.	er pending or contemplated against the
The Integrity Certificate in respect of the a	bove officer is enclosed.
	*
S .	(Signature & Designation of the
	Forwarding Officer with Seal)
Address:	
Dated:	