APPLICATION FOR DEPUTATION (FOREIGN SERVICE TERM BASIS) IN UIDAI TECHNOLOGY CENTRE, BENGALURU (Last date for receipt of Application: 15.09.2020) (Since this vacancy is to be filled up on deputation basis, private candidates are not eligible)

1.										
- 1	Post applied for (Please mention name of									
	the post)							_		
2.	Name of the Candidate (in block letters)									
3.		Gender (√ the appropriate		Male		Female			Paste a recent Passpor	
4.	Category (√ the			SC		ST			size photograph	
25.0	appropriate box)			OBC		Others			Size photograph	
5.	Date of Birth									
	(DD/MM/YYYY)									
6.	Date of retirement									
7.	Address for correspondence, mobile number and e-mail id									
8.	Education of	qualific	cation (G	raduation le	evel and above			= 22.2	No.	
Examination Passed Year			Name of University/ Institute		Percentage of marks/ CGPA		Subjects			
9.	Details of e	mploy ure, if	yment in, the space	in chronolo	ogical order (sufficient)				t, duly authenticated by	
Organization/ Post held Institution			From To		Scale of Pay		Nature of duties			
	itution									
	itution									
Inst	Complete calong with	teleph	none							
Inst	Complete calong with number of	teleph	none							
Inst	Complete of along with number of Employer	teleph the pr	esent	Ad-hoc			To	empor	ary.	
Inst	Complete calong with number of Employer	teleph the pro he pre nt (\sqrt{t}	esent	3.000.0000	ermanent			empor		
	Complete calong with number of Employer Nature of temployment appropriate	teleph the pre he pre nt (\sqrt{t}) te box) ade and h held	esent esent he d date on	3.000.0000						
10.	Complete of along with number of Employer Nature of the employment appropriate Present grafom which regular/sub	the properties the properties the properties the properties to Organization Constitution of the Constituti	esent esent esent d date on ve basis vice, if ganised	3.000.0000						
10. 11.	Complete of along with number of Employer Nature of the employment appropriate Present graffrom which regular/sub Name of the belonging Service of Governme Whether Elf any qual authority for the same of the sam	the property the property to Organication the Control of the Contr	d date on ve basis vice, if ganised entral ional and on has be same.	Quasi-p	ications required sequivalent	to the one p	post a rescri	ermane are sat bed in	isfied the rules, state the	
10. 11. 12.	Complete of along with number of Employer Nature of the employment appropriate of the employment appropriate of the employment appropriate of the employment	the pre the pre the pre the pre the box) ade and the held to Org the Cont ducati difficati for the for mo	d date on ve basis vice, if ganised entral ional and don has be same.	Quasi-pother qualifien treated and post, des	ications required experier	to the one proce for all su	post a rescri	are sat	isfied the rules, state the	
10. 11. 12. 14.	Complete of along with number of Employer Nature of the employment appropriate Present graffrom which regular/sub Name of the belonging Service of Governme Whether Elf any qual authority for the same of the sam	the pre the pre the pre the pre the box) ade and the held to Org the Cont ducati difficati for the for mo	d date on ve basis vice, if ganised entral ional and don has be same.	Quasi-pother qualifien treated and post, des	ications required experier	to the one proce for all su	post a rescri	are sat	isfied the rules, state the	

Desi (i) (ii) (iii)	red:	
15.	In case the present employment is held on deputation/ contract basis, please state	Date of initial appointment Period of appointment on deputation/contract
	prease state	Name of the parent office/organization to which you belong
16.	Training/Courses attended	
17.	Details of award/ honour/ appreciation	
18.	Additional information, if any, which you would like to furnish in support of your suitability for the post. Enclose a separate sheet, if the space is insufficient	
Date	2:	
Plac	e:	(Signature of the Candidate Mobile No. : Office Tel.No. :

Certified that the service particulars given by the applicant have been verified from his/her service records and found to be correct.

Signature with seal of the Competent Authority

To be filled up by the cadre controlling authority

Office	of
F.No	
1.	The applicant Shri/Smt./Ms if selected, will be relieved immediately.
2.	Certified that the particulars furnished by the officer have been checked from available records and found correct.
3.	Certified that the applicant is eligible for the post applied as per conditions mentioned in the circular/advertisement.
4.	Integrity of the applicant is certified as 'Beyond Doubt'.
5.	No Vigilance case is pending/contemplated against the Officer
6.	It is certified that no penalty has been imposed on the applicant during the last 10 years (Alternatively, penalty statement during the last 10 years may be enclosed).
7.	Attested photocopies of up-to-date ACRs/APARs for the last 5 years are enclosed. Photocopies of ACRs/APARs have been attested on each page by an officer not below the rank of Under Secretary or equivalent.
	Signature
	Name, Designation & Tele of the forwarding officer
	(Office Stamp)
Date:	
Place:	