APPLICATION FORM

Leave one space between each word. Fill in CAPITAL LETTERS

	1. POST CODE:									Affix signed passport size photograph which should be signed across													
∠.	TOST ATTEME	<i>j</i> .																					
3.	3. FULL NAME IN BLOCK LETTERS: (Leave one space blank between First Name/Middle Name/Last Name) Mr./Ms./Mrs.																						
																						_	
									<u> </u>						<u> </u>	1				1			
4.	(a)FATHER'S/F	HUSBA	ND'S	NA	ME	:																	
																<u> </u>				<u> </u>		 	
	(b)OCCUPATIO	ON:																					
5.	PERMANENT ADDRESS							PRESENT ADDRESS															
	State:								State:														
	Pin Code:										Pin	Coc	le:										
6.	CONTACT NO RESI:	: (with	n STD	Cod	le)																		
	OFF:														_								
	MOBILE NO:																						
	E-mail:																						
7.	GENDER (M/F): [

8. MARITAL STATU	S (Married / Unmarri	ed):					
9. NATIONALITY:					_		
10. BLOOD GROUP :							
11. CATEGORY TO W	VHICH THE CAND	IDATE BELO	NGS : (1	Indicate by	tick mark in app	propriate	
box) (a) SC	ST	ОВС	<u> </u>	GEN			
, <u>sc</u>		ОВС		GEN			
(b) Person with I	Disability (PWD) - (Y	/ N):					
(c) Ex-Servicem	an (Y / N):	7	<u> </u>				
. ,	, , , <u></u>						
12. DATE OF BIRTH:	(DD/MM/YYYY):						
AGE AS ON 30.09	.2014: Months	Ye	ars				
Age relaxation clain	ned (Y / N) :						
13. PLACE OF BIRTH	[:						
Place:							
Dist:							
State:		_					
14. PLACE / STATE O	OF DOMICILE:						
15. EDUCATIONAL /I	PROFESSIONAL Q	UALIFICATION OF THE PROPERTY O	ONS(in	the order o	f recency):		
Examination Passed	Board / Un Institu	iiversity /	Month	& Year	Percentage of Marks	Division	
rasseu	Institu		From To		Obtained		
Working Knowledge of	 f MS Office & Interi	 net (Y/N):	<u> </u>				
0		` ' I	1				

16. PARTICULARS OF EXPERIENCE (in the order of recency)

Name of Employer #	Desig- nation	Period of Service			ngth of ervice	Nature of duties performed(Attach separate sheet if required)	Remarks (Reason for		
		From	То	Years	Months		leaving Service)		
Total Experien	 nce (in Ye	ears and	month	ns)		Vrc	months		
Experience in (in Years and)		ant area	(as pe	r advertis	sement	Yrs Yrs	months		

> Any break in service till 30.09.2014 or gap in employment to be clearly spelled out.

Last Drawn Gross Salary to be mentioned in case of present employment and salary slip to be annexed.

Candidates, who are presently employed in Private Sector must annex a copy of the Organization Structure and Pay Scale of the present employment (duly signed by the candidate) to justify their eligibility for a particular post.

17. LANGUAGES KNOWN

Language		Spea	ık	R	Read		Write	
18. MOTHER TONG	GUE:							
19. TOTAL NUMBE	R OF DEI	PENDENT	S, if any:					
20. HAVE YOU EVE	R BEEN	CONVICT	ED FOR	ANY CR	IMINAL (OFFEN	NCE?(Yes/No)	
If yes, give details								
21. ADDRESS OF THAD ADDRESS: (Specify 2)N NEAR	EST TO	YOUR PE	RMAN	NENT AND PRES	SENT
	Permanen	t				Pres	sent	
22. PAN Number:								
23. DD Details : Amou	ınt	Date	Bank-		Branch			
DECLARATION I hereby declare the best of my knowledge correct at any stage or me pointment is liable to be	and belie y not satisf	f. I underst fying the eli	tand that in	n the ever	nt of any i	nforma	tion being found f	alse on
I hereby agree that is application and/or or outs. Tribunals/Forums se/dispute. I undertake to ompany.	nt of said at Delhi/N	advertisen New Delhi	nent can bonly shal	pe institut I have so	ed by me ole and ex	only clusive	at Delhi/New Del e jurisdiction to t	hi and ry any
Place:		S	Signature o	f Candida	te:			
Date:			Name of th	e Candida	ite:			