

APPLICATION FORM

1.	Name of the Applicant																																				
2.	Post applied for																																				
3.	Date of Birth																																				
4.	Age as on last date of application																																				
5.	Gender																																				
6.	Date of Superannuation																																				
7.	Name and Address of the organisation last served																																				
8.	Designation at the time of Superannuation																																				
9.	Basic Pay & Scale/Grade at the time of Superannuation																																				
10.	Correspondence address																																				
11.	E-mail																																				
12.	Contact No																																				
13.	Educational Qualification																																				
14.	Complete record of services rendered in Organizations Before superannuation: (With special reference to the experience in the level of post for which application is made)	<table border="1"> <thead> <tr> <th>Post held</th> <th>From</th> <th>To</th> <th>Department</th> <th>Nature of work</th> </tr> </thead> <tbody> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	Post held	From	To	Department	Nature of work																														
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15.	Please indicate your relevant work experience with respect to the post applied in around 500 words.																																				
16.	Any other relevant information																																				

Declaration: I hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false OR incorrect / incomplete or ineligibility being detected at any time before or after selection, my candidature is liable to be rejected, and I shall be bound by the decision of the Department. I have read this circular ready to accept all the terms and conditions (Annexure-II) for engagement of consultants.

(Name & Signature)

Date:

Documents to be enclosed with application form:

1. Identity Proof
2. Proof of Address
3. Copy of Pension Payment Order (P.P.O)
4. Copy of proofs of Educational Qualification
5. Experience certificates and relieving letters