Advertisement No

10480 Dt. 04-07-2023

Application form for the post of –

Application f	orm
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No (for office use only)

Recent coloured P.P. size photo graph attested by 1. Name of the post (Applied for): ----- (Please tick) self Deputation Contract 2. Name of applicant (Surname) (Name) 3. Father's name (Name) (Surname) :..... 4. Parent Department (With full Address) 5. Permanent addressPIN..... · 6. Present addressPIN...... :..../..... (In words) 7. Date of birth (Attested true copy of mark sheet of Higher Secondary School Certificate Examination /equivalent examination exhibiting date of birth) : Unreserved/ OBC/ SC/ ST 9. Category (Please tick) (Self attested true copy of caste certificate in case of OBC/SC/ST candidate) 10. Home district 11. Educational qualification details: (1) Post Graduation (2) Graduation (3) Others (Diploma / ITI : Description etc.) 12. Service and experience details: 1 (a) Parent Department/ Department form which retired (b) Details of organization:....

(c) If working, then, present Post :.....

(0)	d) If working then address of the present office:					
(e)		red, then, name of the post from which retired :				
(f)	Designation at first posting : Name/post and full Address and email of office who will provide CR Grading and vigila details will have to be asked for :					
(g)						
(h)	If working, then present (As per present applicab	pay scale :.				
(i)	Present basic pay :. Rs (Enclose latest Pay slip))		• • • • • • • • • • • • • • • • • • • •		
(J) (K	If retired, then last pay (Please attach LPC & c) Post wise experience (a	opy of PPO)			
lease	list experience starting from	n the post or	n which first joir	ned		
SNo	Institution/Department	Post -	Period		Brief Descriptions of	
			From	То	duty/work	
	ter Knowledge- Do you hav					
SNo	Application/Accounti			f :- 'es/No	Remarks	
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Declaration

I hereby declare that no criminal proceedings /Departmental enquiry of any nature is pending against me. I further declare that information supplied by me in, the application form and its supplementary parts and enclosures annexed to it; are true to the best of my knowledge & belief. My selection to the post may be cancelled and suitable action may be taken, if information furnished by me in Application form is found false or incorrect at any point of time in future.

Date :	(Signature)				
Place :	Name of the applicant:				
Encl –					