

9. Technical/Professional Qualification:

Examination Passed	Name of the Board/University/Institution	Year of Passing	Division	Percentage/Grade	Subjects

10. Experience:

Name of the Institution with Address	Designation	Pay Scale/ Consolidated Salary	Nature of Post	Type of Post	Period From	Period To	Total Experience

11. Shorthand & Typing Speed:

Shorthand English _____ Shorthand Hindi _____
 Typing English _____ Typing Hindi _____

12. Other information. If any. _____

13. Name, Designation and Address with Mobile/Telephone No. of two referees with whom the candidate has worked earlier:

S.No.	Name of Referee	Designation	Period of work	Address; Mobile No./Landline with STD code

14. a) Have you ever been punished for Gender/Caste related offences or convicted by a court of law?: _____
 If yes, give details: _____
- b) Do you have any criminal case pending against you in a court of law?: _____
 If yes, give details: _____
- c) Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed?: _____
 If yes, give details: _____

DECLARATION

1. I have read the applicable guidelines, which are binding. I do hereby solemnly declare that the information given, statements made and documents uploaded with this application form are correct and true to the best of my knowledge and belief. If any information given by me in this application is found to be false and misleading, my candidature is liable to be cancelled and that I may be subjected to legal/disciplinary proceedings.

2. I will send the the print out of my application with original signature and passport size photograph alongwith all self attested testimonials/documents.

Date: _____

Place: _____

Signature of the Candidate

No Objection Certificate

Forwarded with the remarks that the facts stated in the above application have been verified and found correct and this Institution/Organization has no objection to the candidature of the applicant being considered for the post applied for.

Date: _____

Signature (Head of the Institution/Organization)

Place: _____

Name: _____

Designation: _____

Name & Address of the Institution/Organisation:

