AFFIX
NOMINATED
PERSON'S
PASSPORT SIZE
ATTESTED
PHOTOGRAPH

GOVERNMENT OF INDIA/ MINISTRY OF LABOUR AND EMPLOYMENT NOMINATION FOR PRIME MINISTER'S SHRAM AWARDS 2011

The nomination form giving full particulars as specified and as per instructions should reach before closing date i.e. 31st August, 2011 to the Under Secretary, Ministry of Labour and Employment, Shram Shakti Bhawan, Rafi Marg, New Delhi – 110001, along with Crossed Demand Draft of value of Rs. 500/- drawn in favour of "Pay & Accounts Officer (MS), Ministry of Labour, New Delhi" payable at New Delhi in respect of nominations pertaining to Public Sector. The manufacturing units employing 500 or more workers in the Private Sector may forward their applications along with two demand drafts, each for Rs. 500/-, one in favour of "Pay & Accounts Officer (MS), Ministry of Labour, New Delhi" payable at New Delhi and the other drawn in favour of the concerned Nodal Agency. THE DECISION OF THE GOVERNMENT REGARDING THE SELECTION WILL BE FINAL.

NOTE

Before filling up the form, please read the following instructions carefully

- 1. Nomination form received directly from an individual worker will not be accepted.
- 2. The filled in Nomination Form along with the recommendation typed on separate sheet should be routed through the Administrative Central Ministry/ State Government Department/National level Association/Chambers.
- 3. Please type the information against respective columns/ items.
- 4. Strike out whichever is not applicable.
- 5. Enclose two separate passport size attested photographs duly signed at the back side.
- 6. Incomplete nomination form in any manner is liable to be rejected.
- 7. Any type of undue influence/ recommendations on the committee by the nominee or employer will result in disqualification of the nomination.
- 8. Ensure that the **phone numbers** (*Office & Residential*) along with the **Fax number** (with **STD Code**) be furnished without fail.

I. PARTICULARS OF THE WORKER

1. Name in full (block letters)

	(in Roman and Devanagri script)			
2.	Designation	:		
3.	Parent/Spouse's Name	:		
4.	Date and place of birth	:	Age:	Sex:

5.	Present Postal Address	:
•	110001101 00001111001000	•

6. Phone Number (with **STD** code) :

7. Permanent Postal Address :

8. Family background

(State the composition of the family,

their occupation, etc.)

S.No.	Name of Family member	Age	Relationship with the applicant	Occupation

9. Whether physically challenged :

QUALIFICATION:

EDUCATIONAL	TECHNICAL	PROFESSIONAL

NOTE: 1. Please attach certified copies of the Certificates/Mark Sheets about qualification duly attested by Executive Magistrate or Gazetted Officer of the Govt. or Principal of the School/College.

EXPERIENCE:

Date of	Desig	nation	Years of	Remarks	
Appointment	At the time of appointment	Present	Experience		

i) Nature of work :

ii) Duties and responsibilities entrusted to the worker :

iii) Present Salary :

NOTE : Please attach a separate sheet wherever needed.

II. ABOUT THE INDUSTRY/ COMPANY WHERE THE NOMINATED PERSON IS EMPLOYED.

Name & address of the company/ factory	Name & address of the employer	Tel.No./ Fax.No./ e-mail	No. of workers employed

Pagistration No. under	Enforcement Authority					
Registration No. under relevant Act	Name of the officer with postal	Tel.No./ Fax.No./ e-mail				
Toto vant Tiot	address					

III	I. BRIEF HISTORY OF NOMINATED PERSON
a)	About personal characteristics of the nominated person in general:
b)	About the service:
	i) with previous employer :
	ii) with present employer :

c) Any other information relevant and : which is not reflected in the form highlighting the other activities of the nominated person

IV. PARTICULARS OF AWARDS GRANTED TO NOMINATED PERSON IN THE PAST:

a)

Year in	Name of the	Name & Address of the	Tel.No./ Fax
which	Award Conferred	Organisation/ Body	No./ e-mail
Award			
conferred			

b) Brief highlight of each Award conferred:

Note: Please attach certified copies of the Awards certificates as a documentary proof.

CITATION

(To be given by the Head of the Organisation/Company/Chief Executive Officer)

NOTE: To be subn	nitted in type	d form in	not more	than 600	0 words	giving	details	or
following p	oints.							

- 1. Meritorious service
- 2. Achievements

Place: Signature

Date: Name & Designation Address:

OFFICE SEAL

<u>CERTIFICATE</u> (To be signed by Nominated person)

Ι	the undersigned Shri/Smt./Kum.
	hereby give my willingness to accept
the Award and Sanad awarded to me under	er the Prime Minister's Shram Awards Scheme.
If I am selected for such Award, I shall a	bide by the rules and regulations prescribed by
the Committee and the Committee's decis	ion will be binding on me.
Date:	Signature/Thumb Impression of the Nominated person (Left hand Thumb Impression, if Male and Right hand Thumb Impression, if Female.)
<u>Countersigned by the Employer</u> :	
Name:	
Designation:	
Industry's/Company's Seal:	

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DECLARATION OF NOMINATED PERSON

I hereby declare that all the statements made

in the nomination form are true, complete and correct. In the event of any information

being found false/incorrect or ineligibility being detected before or after the declaration

of the Prime Minister's Shram Award, my nomination will stand automatically cancelled.

I am also aware that the Government reserves the right to withdraw the Award with penal

action, if any irregularity is detected at a later stage.

I further declare that I am a citizen of India.

Place:

Date:

Signature/Thumb Impression

of the Nominated person (Left hand Thumb Impression, if

Male and Right hand Thumb

Impression, if Female.)

EMPLOYER'S CERTIFICATE

1.	This	is	to	certify	that	our	Industry/Co.	mpany	is	registered	under	the
					A	ct. Our	Registration	No. is _		a	nd further	r it is
certifie	ed that	Shri/S	mt./K	um			is	a tempo	rary/p	ermanent e	mployee o	of our
industr	y/Com	pany								M/s		
										situate	d	at
				and that	t he/sh	e is wo	rking with us	from _				_ and
holding	g a post	of		in o	our Indu	ıstry/Co	mpany.					
2.	Furthe	er it is	certi	fied that _J	particul	ars furn	nished by Shri	/Smt./Ku	ım			have
been vo	erified	from h	is/hei	record ar	nd foun	d correc	et.					
3.	No v	igiland	ce ca	se is eith	ner pen	ding or	contemplate	d agains	t Shr	i/Smt./Kum	·	
His/he	r integr	ity is t	eyon	d doubt.								
4.	No m	ajor o	r mino	or penalty	was in	nposed	on Shri/Smt./I	Kum			durin	ıg last
10 year	rs.											
5.	He/sh	e is ha	ırd wo	orking, sin	icere an	d hones	t in dischargin	ng the du	ties al	lotted to hin	n / her.	
6.	He/sh	e has i	not ca	used any	reporta	ble acci	dent during las	st 10 year	rs.			
7.	I am	also	awar	e that if	any ii	rregulari	ity/false infor	mation i	is det	ected befor	e or afte	r the
declara	ation, po	enal ac	ction 1	nay be tal	ken aga	inst me.						
	We w	ish hii	m / he	r grand su	iccess.							
	The u	ndersi	gned	is duly au	thorized	d to sign	this certificat	e.				
Date :								Signatu	re			
Place :								Name & Tel.No.	de Desi	gnation		

OFFICE SEAL

(TO BE OBTAINED BY THE RECOMMENDING AUTHORITY)

NOMINATED PERSON'S PASSPORT SIZE PHOTOGRAPH

VERIFICATION CERTIFICATE FROM THE LOCAL POLICE STATION

This	is	to	certify		that		Shri/Smt./Kum.		
				son	of/	wife	of/	daughter	of
							is no	ot involved	1 in
any case and no	criminal ca	se is registe	ered against h	im/he	r. H	is/her	recor	d is good	and
he/she is residi	ing at _								<u></u> .
Further, it is certif	fied that he	she does no	ot have any ar	nti-soc	cial/c	rimina	l case	record.	
Other remarks, if	any.								
Place:			Signa	ature					
Date:			U		e Po	lice O	fficer	with	
			Full a	addres	s, Te	1. No.,	Fax	No.	

OFFICE SEAL

<u>NOTE</u>: The officer issuing the Verification certificate should attest the photograph of the nominated person with a signature and rubber stamp in such a way that one half of the signature and stamp appears on the photograph and the other half on the certificate.

