

APPLICATION FORM FOR THE POST OF _____

(Through Proper Channel, except candidates from the Private sector)

1. Name of the post applied for:
2. (a) Applicant's Name (as per official records Mr./Mrs./Ms.):
(b) Designation of the Applicant (in full):
(c) Name of the Company:
(d) Category as per Employment Status: Officer of a CPSE/Central Government/
(Please Tick as applicable) Armed Forces of the Union/All India
Services/SPSE/Private Sector
(e) Office Address:
(f) Address for communication:
3. Telephone No. Office:_____ Residence _____ Mobile No._____
E-Mail ID:_____.
4. Date of Birth (DD/MM/YY):
5. (i) Educational/Professional Qualification:

Sr. No.	Qualification*	Name of Institution	Period of Study	Tick the relevant			Self-Declaration Whether meets the eligibility qualification requirement		
				Full Time	Correspondence	Degree	Mandatory	Desirable	Other

*Should be exactly as per Degree/Certificate issued by the University.

	(ii)	Postings held during the last 25 years:	
--	------	---	--

Sr. No.	Complete Designation & Place of posting*	Name of the Organization	Pay Scale**	Period	Reporting to Designation	Does it meet the mandatory experience requirement, with reason

*Should be exactly as per specific office order issued by the CPSE/Ministry/SPSE/Employer

**Private Sector-CTC/remuneration/emoluments drawn

NB: the positions should be indicated in order of the most recent assignments.

6.	(a)	Do you hold lien in any organization other where currently working if Yes: i) Name of the Organization in which the lien is held: ii) Date from which the lien is held:	<div>Yes</div> <div>No</div>
	(b)	Are you on deputation? If Yes: i) Name of parent Organization: ii) Date from which on deputation:	<div>Yes</div> <div>No</div>
7.	(a)	Whether any penalty/punishment was awarded to the applicant during his/her service: If yes, the details thereof: i) Civil/Criminal ii) Departmental Inquiry	<div>Yes</div> <div>No</div>
	(b)	Whether any Civil or Criminal action or inquiry is going on against the applicant as far as his/her knowledge goes. If yes, the details thereof: i) Civil/Criminal ii) Departmental Inquiry	<div>Yes</div> <div>No</div>

8. Gist of ACRs of last 10 years:

Year	Reporting Authority	Reviewing Authority	Accepting Authority

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge & belief.

(Name & Signature of the Applicant)

STATE PUBLIC SECTOR ENTERPRISES

Year-wise Audited Annual Turnover of the Company for 3 financial years preceding the calendar year in which the post has been advertised (e.g: 2014-15, 2015-16 and 2016-17 for a post advertised in the calendar year 2018).

Year	Company in which candidate is/was serving	Annual Turnover of the Company & FY.
-------------	--	---

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge.

(Name & Signature of the Applicant)

PRIVATE SECTOR

Year-wise Audited Annual Turnover of the Company for 3 financial years preceding the calendar year in which the post has been advertised (e.g: 2014-15, 2015-16 and 2016-17 for a post advertised in the calendar year 2018).

Year	Company in which candidate is/was serving	Annual Turnover of the Company & FY.

(i)	The annual report for the last 3 years :			
	(a) may be accessed over _____(Please provide URL), or			
	(b) enclosed			
(ii)	I certify that I am			
	(a) Working at Board level position:	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
	(b) Working atleast a post of the level immediately below Board level:	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
	(c) Whether the company is listed if yes:	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
Proof of listing may be accessed over _____(Please provide URL)				
(iii)	Self-certified copies for proof of age and educational qualifications (enclosed)			

(iv)	The relevant jobs handled in the past with details/particular references	
-------------	--	--

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge & belief.

(Name & Signature of the Applicant)

Declaration

I, _____ Son/Daughter of _____ hereby certify that I have not been disqualified to act as a Director under Section 164 or any other relevant sections of the Indian Companies Act, 2013.

(Name & Signature of the Applicant)

Verification

(To be filled in by the designated officer for CPSE/Central Government/Armed Forces of the Union/All India Services/SPSE)

It is certified that the particulars furnished above have been scrutinized and found to be correct as per official records.

**Signature & Designation of the Competent Authority
With Telephone No. & E-mail address**