The National Academy of Sciences, India 5, Lajpatrai Road, Prayagraj – 211 002

APPLICATION FORM FOR THE POST OF ACCOUNTS OFFICER

		(For of	fice use on	ly)				
	ible: ot Eligible, reason thereof	pa. photog sign ac so tha	Paste your recent passport-size photograph here and sign across the photo so that part of your					
	(Signatu	res of Screei	ning Comm	iittee Memb	ers)			ure should be a the form.
1	Name		First Name	9	Mi	ddle Name	Sur	name
	(In Capital Letters)							
2	Date of birth	Day	Month	Year	A (0.0)	c on the last	Years	Months
					date	s on the last of rtisement		
3	Place of birth		City/Villag	е		State	Сон	untry
4	Mother's Name							
5	Father's Name							
6	Address		Correspon	ndence			Permanent	
		City:				City:		
		District:				District:		
		State:				State:		
		Pin Code:				Pin Code:		
		Mobile: Mobile:						
		Email:				Email:		
7	Nationality							
8	Sex	Male/ Fema	lle/Transge	ender:				

9	Category	Unreserved
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educatio	onal Qualific	ations	(Attach a	dditional	pages, if re	quired)			
	Name of course	В	ne of the oard/ versity	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicate equivalent to CGPA also)	<u>د</u>	Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	ſſ	(g)	(h)
10th Class/ equivalent									
10+2/Higher Secondary/ equivalent									
Bachelor's degree									
Master's degree									
			Name of C	ourse/Su	bject	Year		Subject studied	Sl. No. of Proof of enclosure
Any other ex	ams passed								
12. Chronol	ogical list of	Exper	ience (sta				oloyment)		
				Perio	d of Experie	ence			
Designation	Name & addro employei		From		То	Pay level as 7 th CPC ar Basic pa drawn	nd y	ature of work/ duties	Sl. No. of proof of enclosure
(a)	<i>(b)</i>		(c)		(d)	(e)		(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

13. Nature of Experience		
	Duration and Details of duties performed	Sl. No. of proof of enclosure
a) Cash and Accounts		
b) Administrative		
c) Other experience, if any		
Total Experience		

* (Add a separate sheet if required, to be annexed at relevant S.No.)

14. Details of the training programme attended

Name of the Programme	Year	Duration of the training	Organizing Institution

- 15. Have you ever been punished during your studies at College/University? (Yes/No) :
- 16. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
- 17. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No) :
- 18. Do you have any case of vigilance/enquiry pending against you in the present/earlier employment? (Yes/No) :
- 19. Do you have any case pending against you in any court of law? (Yes/No) :
- 20. Any other information/qualification relevant to the post applied for:

21. Declaration	
I,son/daughter_of	hereby
declare that all the statements and entries made in this application form are true, complete and correct to the	he best of
my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detect	ted at any
stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointmen	nt may be
cancelled by the Academy.	
I have never been convicted or contemplated for any unlawful activity.	
Signature of the .	Applicant
*Name as signed (in BLOCK LET Date:	TERS)

*Application not signed by the candidate is liable to be rejected

22. Endorsement by the EMPLOYER (for In-Service Applicants)

Certificate of Verification by the Employer

- 1. The entries made in application of Dr./ Sh./ Smt./ Km for the post of Accounts Officer has been duly verified from the records and is found correct.
- 2. There is no vigilance/disciplinary/criminal case pending against him/her. (Yes/No)

If Yes, please give details.....

3. Whether any Minor/Major penalties under CCS (CCA) rules, 1965 have been imposed during the last ten years on him / her – (Yes / No)

If yes, please give details.....

4. Certified that the work and conduct (overall assessment) of Dr./Sh/Smt./Km...... is above/or good (as graded in ACR/APAR)during the last five years.

Year →			
Grading/Rating by Reporting Officer →			
Grading/Rating by Reviewing Officer →			

Signature:

Name:

Designation with office seal

Date:

Office Seal

In service candidate should get the above endorsement signed by his/her present forwardingauthority.

Please tick the enclosures attached:

SI.	Check List	Sl. No. of enclosure	No. of Sheets
1.	Proof for Date of Birth		
2.	Matric/Secondary/High School (10 th Class) Marks Sheet		
3.	Matric/Secondary/High School (10 th Class) Certificate		
4.	Sr. Secondary/Intermediate (12 th Class) Marks Sheet		
5.	Sr. Secondary/Intermediate (12 th Class) School Certificate		
6.	Bachelor's qualification Final Year Marks Sheet		
7.	Bachelors' Degree		
8.	Master's qualification Final Year Marks Sheet		
9.	Master's Degree		
10.	Any other Qualification		
11.	Caste Certificate issued by the Competent Authority		
12.	Experience Certificate(s) from previous employer(s)		
13.	Endorsement from the present employer		
14.	Any other		

Total number of sheets enclosed_____(please give sequential number to each sheet and signature with date).

The National Academy of Sciences, India 5, Lajpatrai Road, Prayagraj – 211 002

APPLICATION FORM FOR THE POST OF COMPUTER PROGRAMMER

		(For off	fice use on	ly)					
	ible: ot Eligible, reason thereof		Paste your recent passport-size photograph here and sign across the photo so that part of your signature should be on the form.						
	(Signatu	si							
1	Name]	First Name	9	Mie	ddle Name		Surname	
	(In Capital Letters)								
2	Date of birth	Day	Month	Year		s on the last	Years	Months	
					date				
3	Place of birth		City/Villag	е		State	Country		
4	Mother's Name								
5	Father's Name					_			
6	Address		Correspon	ndence		Permanent			
		City:				City:			
		District:				District:			
		State:				State:			
		Pin Code: Pin Code:							
		Mobile: Mobile:							
		Email:				Email:			
7	Nationality								
8	Sex	Male/ Fema	lle/Transge	ender:					

9	Category	Unreserved
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educational Qualifications (Attach additional pages, if required)										
	Name of course	В	ne of the oard/ iversity	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicates equivalent to CGPA also)			Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	ſſ		(g)	(h)
10th Class/ equivalent										
10+2/Higher Secondary/ equivalent										
Bachelor's degree										
Master's degree	2									
			Name of C	ourse/Su	bject		Year		Subject Studied	Sl. No. of Proof of enclosure
Any other e.	xams passed									
12. Chronol	logical list of	Exper	ience (sta				oloyment)			
				Perio	d of Experie					SL No. of
Designation	Name & addro employe		From		То	Pay level as 7 th CPC ar Basic pa drawn	nd		e of work/ luties	Sl. No. of proof of enclosure
(a)	(b)		(c)		(d)	(e)			(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

- 13. Have you ever been punished during your studies at College/University? (Yes/No) :
- 14. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
- 15. Were you at any time declared medically unfit or asked to submit your resignation, or discharged or dismissed? (Yes/No) :
- 16. Do you have any cases of vigilance/enquiry pending against you in the present/earlier employment? (Yes/No) :
- 17. Do you have any case pending against you in any court of law? (Yes/No) :

14. Any other information/qualification relevant to the post applied for:

19. Declaration							
I,son/daughter ofhereby							
declare that all the statements and entries made in this application form are true, complete and correct to the best of							
my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected at any							
stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointment may be							
cancelled by the Academy.							
I have never been convicted or contemplated for any unlawful activity.							
Signature of the Applicant							
*Name as signed (in BLOCK LETTERS)							
Date:							

20. Endorsement by the EMPLOYER (for In-Service Applicants)

Certificate of Verification by the Employer

1.	The entries made in application of Dr./ Sh./ Smt./ Km
	for the post of Computer Programmer have been duly verified from the records and are found correct.

2. There is no vigilance/disciplinary/criminal case pending against him/her. (Yes/No)

If Yes, please give details.....

3. Whether any Minor/Major penalties under CCS (CCA) rules, 1965, have been imposed during the last ten years on him / her – (Yes / No)

If yes, please give details.....

4. Certified that the work and conduct (overall assessment) of Sh/Smt./Km is above /or good (as graded in ACR/APAR) during the last five years.

Year →			
Grading/Rating by Reporting Officer \rightarrow			
Grading/Rating by Reviewing Officer →			

Signature:

Name:

Designation with office seal

Date:

Office Seal

In service candidate should get the above endorsement signed by his/her present forwardingauthority.

Please tick the enclosures attached:

SI.	Check List	Sl. No. of enclosure	No. of Sheets				
1.	Proof for Date of Birth						
2.	Matric/Secondary/High School (10 th Class) Marks Sheet						
3.	Matric/Secondary/High School (10 th Class) Certificate						
4.	Sr. Secondary/Intermediate (12thClass) Marks Sheet						
5.	Sr. Secondary/Intermediate (12thClass) School Certificate						
6.	Bachelor's Qualification Final Year Marks Sheet						
7.	Bachelors' Degree						
8.	Master's Qualification Final Year Marks Sheet						
9.	Master's Degree						
10.	Any other Qualification						
11.	Caste Certificate issued by the Competent Authority						
12.	Experience Certificate(s) from previous employer(s)						
13.	Endorsement from the present employer						
14.	Any other						

Total number of sheets enclosed_____(please give the sequential number to each sheet and signature with date).

The National Academy of Sciences, India 5, Lajpatrai Road, Prayagraj – 211 002

APPLICATION FORM FOR THE POST OF COMPUTER OPERATOR (ON DEPUTATION)

(For office use only)									
_	i ble: ot Eligible, reason thereof		Paste your recent passport-size						
	If not Eligible, reason thereof:							photograph here and sign across the photo so that part of your signature should be on the form.	
1	Name		First Name	e	Mi	ddle Name		Sur	name
	(In Capital Letters)								
2	Date of birth	Day	Month	Year	1000	a on the last	Yea	rs	Months
					date	s on the last of rtisement			
3	Place of birth		City/Villag	е		State		Country	
4	Mother's Name								
5	Father's Name					-			
6	Address		Correspo	ndence			Perma	anent	
		City:				City:			
		District: District:							
		State: State:				State:			
		Pin Code: Pin Code:							
		Mobile: Mobile:							
		Email:				Email:			
7	Nationality								
8	Sex	Male/ Fema	Male/ Female/Transgender:						

9	Category	Unreserved
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educational Qualifications (Attach additional pages, if required)										
	Name of course	В	ne of the oard/ iversity	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicates equivalent to CGPA also)		bjects studied	Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	ſſ		(g)	(h)
10th Class/ equivalent										
10+2/Higher Secondary/ equivalent										
Bachelor's degree										
Master's degree	2									
			Name of C	ourse/Su	Year			Subject Studied	Sl. No. of Proof of enclosure	
Any other e.	xams passed									
12. Chronol	logical list of	Exper	ience (sta				oloyment)			
				Perio	d of Experie					SL No. of
Designation Name & addr employe			From		То	Pay level as 7 th CPC ar Basic pa drawn	nd	er Nature o duti		Sl. No. of proof of enclosure
(a)	(b)		(c)		(d)	(e)			(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

- 13. Have you ever been punished during your studies at College/University? (Yes/No) :
- 14. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
- 15. Were you at any time declared medically unfit or asked to submit your resignation, or discharged or dismissed? (Yes/No) :
- 16. Do you have any cases of vigilance/enquiry pending against you in the present/earlier employment? (Yes/No) :
- 17. Do you have any case pending against you in any court of law? (Yes/No) :

14. Any other information/qualification relevant to the post applied for:

19. Declaration					
I,son/daughter ofhereby					
declare that all the statements and entries made in this application form are true, complete and correct to the best of					
my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected at any					
stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointment may be					
cancelled by the Academy.					
I have never been convicted or contemplated for any unlawful activity.					
Signature of the Applicant					
*Name as signed (in BLOCK LETTERS) Date:					
*Application not signed by the candidate is liable to be rejected					

Certificate of Verification by the Employer

for the post of Computer Programmer	r have been duly verified from the records and are found corre
2. There is no vigilance/disciplinary/crimi	inal case pending against him/her. (Yes/No)
If Yes, please give details	
	nder CCS (CCA) rules, 1965, have been imposed during the last Yes / No)
If yes, please give details	
	overall assessment) of Sh/Smt./Kmis R) during the last five years. (Copy of the same be attached)
	Signature:
	Name:
	Designation with office seal
Office Seal	Date:
rvice candidate should get the above endo	rsement signed by his/her present forwardingauthority.

Please tick the enclosures attached:

SI.	Check List	Sl. No. of enclosure	No. of Sheets				
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8.	Master's Qualification Final Year Marks Sheet						
9.	Master's Degree						
10.	Any other Qualification						
11.	Caste Certificate issued by the Competent Authority						
12.	Experience Certificate(s) from previous employer(s)						
13.	Endorsement from the present employer						
14.	Any other						

Total number of sheets enclosed_____(please give the sequential number to each sheet and signature with date).

The National Academy of Sciences, India 5, Lajpatrai Road, Prayagraj – 211 002

APPLICATION FORM FOR THE POST OF STENO-TYPIST

	(For office use only)							
Elig	Eligible:(Yes / No)							
If no	f not Eligible, reason thereof:							
	sign across the photo so that part of your							
							sign	ature should be on the form.
	(Signatures of Screening Committee Members)							
1	Name	I	First Name	e	Mie	ddle Name	Su	rname
	(In Capital Letters)							
2	Date of birth	Day	Month	Year	Age a	s on the last	Years	Months
					date	of		
3	Place of birth		ity /Villag	0	adve	rtisement <i>State</i>	C	ountry
3	riace of birth	L	City/Villag	e		Slute	L	Junity
4	Mother's Name							
5	Father's Name							
6	Address		Correspo	ndence			Permanen	t
		City:				City:		
		District:				District:		
		State:				State:		
		Pin Code:				Pin Code:		
		Mobile:				Mobile:		
		Email:				Email:		
7	Nationality							
8	Sex	Male/ Fema	Male/ Female/Transgender:					

9	Category	Unreserved
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educational Qualifications (Attach additional pages, if required)										
	Name of course	В	ne of the oard/ iversity	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicates equivalent to CGPA also)		bjects studied	Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	ſſ		(g)	(h)
10th Class/ equivalent										
10+2/Higher Secondary/ equivalent										
Bachelor's degree										
Master's degree	2									
			Name of C	ourse/Su	bject		Year		Subject Studied	Sl. No. of Proof of enclosure
Any other e.	xams passed									
12. Chronol	logical list of	Exper	ience (sta				oloyment)			
				Perio	d of Experie					SL No. of
Designation	Name & addro employe		From		То	Pay level as 7 th CPC ar Basic pa drawn	nd		e of work/ luties	Sl. No. of proof of enclosure
(a)	(b)		(c)		(d)	(e)			(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

- 13. Have you ever been punished during your studies at College/University? (Yes/No) :
- 14. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
- 15. Were you at any time declared medically unfit or asked to submit your resignation, or discharged or dismissed? (Yes/No) :
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- 17. Do you have any case pending against you in any court of law? (Yes/No) :

14. Any other information/qualification relevant to the post applied for:

19. Declaration							
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my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected at any							
stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointment may be							
cancelled by the Academy.							
I have never been convicted or contemplated for any unlawful activity.							
Signature of the Applicant							
*Name as signed (in BLOCK LETTERS)							
Date: *Application not signed by the candidate is liable to be rejected							

20. Endorsement by the EMPLOYER (for In-Service Applicants)

Certificate of Verification by the Employer

1.	The entries made in application of Dr./ Sh./ Smt./ Km
	for the post of Computer Programmer have been duly verified from the records and are found correct.

2. There is no vigilance/disciplinary/criminal case pending against him/her. (Yes/No)

If Yes, please give details.....

3. Whether any Minor/Major penalties under CCS (CCA) rules, 1965, have been imposed during the last ten years on him / her – (Yes / No)

If yes, please give details.....

4. Certified that the work and conduct (overall assessment) of Sh/Smt./Km is above /or good (as graded in ACR/APAR) during the last five years.

Year →			
Grading/Rating by Reporting Officer \rightarrow			
Grading/Rating by Reviewing Officer →			

Signature:

Name:

Designation with office seal

Date:

Office Seal

In service candidate should get the above endorsement signed by his/her present forwardingauthority.

Please tick the enclosures attached:

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11.	Caste Certificate issued by the Competent Authority		
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13.	Endorsement from the present employer		
14.	Any other		

Total number of sheets enclosed_____(please give the sequential number to each sheet and signature with date).

The National Academy of Sciences, India 5, Lajpatrai Road, Prayagraj – 211 002

APPLICATION FORM FOR THE POST OF OFFICE ASSISTANT (UDC)

	(For office use only)									
	i ligible: (Yes / No) f not Eligible, reason thereof:							Paste your recent passport-size		
If no	(Signatures of Screening Committee Members)							plassport size photograph here and sign across the photo so that part of your signature should be on the form.		
			_		-					
1	Name						Sur	name		
	(In Capital Letters)									
2	Date of birth	Day	Month	Year	1000	a an tha last	Yea	irs	Months	
				Age as on the last dateof advertisement						
3	Place of birth	(City/Villag	е		State	ite Count		intry	
4	Mother's Name									
5	Father's Name									
6	Address		Correspon	ndence		Permanent				
		City:				City:				
		District:				District:				
		State:				State:				
		Pin Code:				Pin Code:				
Mobile: Mobile:										
		Email:				Email:				
7	Nationality									
8	Sex	Male/ Fema	le/Transge	ender:						

9	Category	Unreserved
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educational Qualifications (Attach additional pages, if required)										
	Name of course	В	ne of the oard/ iversity	Year passed	Division	CGPA (if grading is applicable)	% of Marks (pl. indicates equivalent to CGPA also)		bjects studied	Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	ſſ		(g)	(h)
10th Class/ equivalent										
10+2/Higher Secondary/ equivalent										
Bachelor's degree										
Master's degree	2									
			Name of C	ourse/Su	bject		Year		Subject Studied	Sl. No. of Proof of enclosure
Any other e.	xams passed									
12. Chronol	logical list of	Exper	ience (sta				oloyment)			
				Perio	d of Experie					SL No. of
Designation	Name & addro employe		From		То	Pay level as 7 th CPC ar Basic pa drawn	nd		e of work/ luties	Sl. No. of proof of enclosure
(a)	(b)		(c)		(d)	(e)			(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

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- 15. Were you at any time declared medically unfit or asked to submit your resignation, or discharged or dismissed? (Yes/No) :
- 16. Do you have any cases of vigilance/enquiry pending against you in the present/earlier employment? (Yes/No) :
- 17. Do you have any case pending against you in any court of law? (Yes/No) :

14. Any other information/qualification relevant to the post applied for:

19. Declaration							
I,son/daughter ofhereby							
declare that all the statements and entries made in this application form are true, complete and correct to the best of							
my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected at any							
stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointment may be							
cancelled by the Academy.							
I have never been convicted or contemplated for any unlawful activity.							
Signature of the Applicant							
*Name as signed (in BLOCK LETTERS)							
Date: *Application not signed by the candidate is liable to be rejected							

20. Endorsement by the EMPLOYER (for In-Service Applicants)

Certificate of Verification by the Employer

1.	The entries made in application of Dr./ Sh./ Smt./ Km
	for the post of Computer Programmer have been duly verified from the records and are found correct.

2. There is no vigilance/disciplinary/criminal case pending against him/her. (Yes/No)

If Yes, please give details.....

3. Whether any Minor/Major penalties under CCS (CCA) rules, 1965, have been imposed during the last ten years on him / her – (Yes / No)

If yes, please give details.....

4. Certified that the work and conduct (overall assessment) of Sh/Smt./Km is above /or good (as graded in ACR/APAR) during the last five years.

Year →			
Grading/Rating by Reporting Officer →			
Grading/Rating by Reviewing Officer →			

Signature:

Name:

Designation with office seal

Date:

Office Seal

In service candidate should get the above endorsement signed by his/her present forwardingauthority.

Please tick the enclosures attached:

SI.	Check List	Sl. No. of enclosure	No. of Sheets
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2.	Matric/Secondary/High School (10 th Class) Marks Sheet		
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5.	Sr. Secondary/Intermediate (12 th Class) School Certificate		
6.	Bachelor's Qualification Final Year Marks Sheet		
7.	Bachelors' Degree		
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11.	Caste Certificate issued by the Competent Authority		
12.	Experience Certificate(s) from previous employer(s)		
13.	Endorsement from the present employer		
14.	Any other		

Total number of sheets enclosed_____(please give the sequential number to each sheet and signature with date).

The National Academy of Sciences, India 5, Lajpatrai Road, Prayagraj – 211 002

APPLICATION FORM FOR THE POST OF MULTI-TASKING STAFF (MTS)

	(For office use only)									
Eligible:(Yes / No) If not Eligible, reason thereof:						Paste your recent passport-size photograph here and sign across the photo				
	(Signatures of Screening Committee Members)							so that part of your signature should be on the form.		
1	Name]	First Name	9	Mie	ddle Name		Surname		
	(In Capital Letters)									
2	Date of birth	Day	Month	Year	Age as on the last dateof advertisement		Years		Months	
3	Place of birth	(City/Villag	е		State		Сон	untry	
4	Mother's Name									
5	5 Father's Name									
6	Address		Correspondence Pe				Perm	Permanent		
		City:				City:				
		District:				District:				
		State:				State:				
		Pin Code:				Pin Code:				
		Mobile:				Mobile:				
		Email:				Email:				
7	Nationality									
8	Sex	Male/ Fema	le/Transge	ender:						

9	Category	Unreserved
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educational Qualifications (Attach additional pages, if required)										
	Name of course	В	ne of the oard/ iversity	Year passe	Division	CGPA (if grading is applicable)	% of Marks (pl. indicates equivalent to CGPA also)		bjects studied	Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	(f)		(g)	(h)
10th Class/ equivalent										
10+2/Higher Secondary/ equivalent										
Bachelor's degree										
Master's degree	2									
			Name of Course/Subject			Year		1	Subject Studied	Sl. No. of Proof of enclosure
Any other e	xams passed									
12. Chrono	logical list of	Exper	r ience (sta	irting fr	rom current	position/ emp	oloyment)			
				Peri	iod of Experi	ence				
Designation Name & address of employer		From To		Pay level as per N 7 th CPC and Basic pay drawn		lature of work/ duties		Sl. No. of proof of enclosure		
(a)	(b)		(c)		(d)	(e)		Ø		(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

- 13. Have you ever been punished during your studies at College/University? (Yes/No) :
- 14. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
- 15. Were you at any time declared medically unfit or asked to submit your resignation, or discharged or dismissed? (Yes/No) :
- 16. Do you have any cases of vigilance/enquiry pending against you in the present/earlier employment? (Yes/No) :
- 17. Do you have any case pending against you in any court of law? (Yes/No) :

14. Any other information/qualification relevant to the post applied for:

19. Declaration					
I,son/daughter ofhereby					
declare that all the statements and entries made in this application form are true, complete and correct to the best of					
my knowledge and belief. In the event of any information found false or incorrect or ineligibility being detected at any					
stage or not satisfying the eligibility criteria according to the advertisement, my candidature/appointment may be					
cancelled by the Academy.					
I have never been convicted or contemplated for any unlawful activity.					
Signature of the Applicant					
*Name as signed (in BLOCK LETTERS) Date:					
*Application not signed by the candidate is liable to be rejected					

20. Endorsement by	the EMPLOYER	(for In-Service Applicants))
		(•

Certificate of Verification by the Employer

1. The entries made in application of Dr./ Sh./ Smt./	′ Km
for the post of Computer Programmer have be	een duly verified from the records and are found correct
2. There is no vigilance/disciplinary/criminal case	pending against him/her. (Yes/No)
If Yes, please give details	
3. Whether any Minor/Major penalties under CCS ten years on him / her – (Yes / No	(CCA) rules, 1965, have been imposed during the last)
If yes, please give details	
 Certified that the work and conduct (overall as above /or good during the last five years. 	ssessment) of Sh/Smt./Km is
	Signature:
	Name:
	Designation with office seal
Office Seal	Date:
n service candidate should get the above endorsement	signed by his/her present forwardingauthority.

Please tick the enclosures attached:

SI.	Check List	Sl. No. of enclosure	No. of Sheets
1.	Proof for Date of Birth		
2.	Matric/Secondary/High School (10 th Class) Marks Sheet		
3.	Matric/Secondary/High School (10 th Class) Certificate		
4.	Sr. Secondary/Intermediate (12 th Class) Marks Sheet		
5.	Sr. Secondary/Intermediate (12 th Class) School Certificate		
6.	Bachelor's Qualification Final Year Marks Sheet		
7.	Bachelors' Degree		
8.	Any other Qualification		
9.	Caste Certificate issued by the Competent Authority		
10.	Experience Certificate(s) from previous employer(s)		
11.	Endorsement from the present employer		
12.	Any other		

Total number of sheets enclosed______(please give the sequential number to each sheet and signature with date).