## **ANNEXURE-I**

| Applic | cation for the post      | <b>,,</b> | Affix one recent |         |    |    |          |                          |  |  |
|--------|--------------------------|-----------|------------------|---------|----|----|----------|--------------------------|--|--|
| 1.     | Name in Full             |           | :                |         |    |    |          | Passport size Photograph |  |  |
| 2.     | Father's/ Husband's      |           |                  |         |    |    |          |                          |  |  |
| 3.     | Permanent Address :      |           |                  |         |    |    |          |                          |  |  |
| 4.     | Present Postal Address : |           |                  |         |    |    |          |                          |  |  |
| 5.     | Nationality :            |           |                  |         |    |    |          |                          |  |  |
| 6.     | Date of Birth:           | DD N      | 1M               | YYYY    |    |    |          |                          |  |  |
| 7.     | Marital Status:          | Married   | Un               | nmarrie | ed |    |          |                          |  |  |
| 8.     | Category:                | GEN       | ОВС              |         | SC | ST | PH(HH) S | x<br>erviceman           |  |  |
|        |                          |           |                  |         |    |    |          |                          |  |  |

| 9 | . / | Academi | and Pro | otessiona | 1/ Q | uali | fication | : |
|---|-----|---------|---------|-----------|------|------|----------|---|
|---|-----|---------|---------|-----------|------|------|----------|---|

| Name of the Examination Passed (Exam/Degree) | Board/University | Name of the College/Institute | Year of<br>Passing | % of<br>marks/Div.<br>Obtained | Subject |
|--|------------------|-------------------------------|--------------------|--------------------------------|---------|
| SSC  |                  |                               |                    |                                |         |
| HSSC   |                  |                               |                    |                                |         |
| Graduation                                   |                  |                               |                    |                                |         |
| Post Graduation                              |                  |                               |                    |                                |         |
| Professional Qualification                   |                  |                               |                    |                                |         |
| Any Other                                    |                  |                               |                    |                                |         |

| Sr.<br>No | Name of the Organization (Ministry/Departmen t/Government Organization/Autono umous Body/ Private organization)                                     | Designation         | Whether post is held on regular basis or adhoc basis or on deputation basis or in private firm | Per                     | Pay<br>Scale/S<br>alary | Nature<br>of<br>work |          |
|-----------|---|---------------------|--|-------------------------|-------------------------|----------------------|----------|
|           |   |                     |  | From<br>(DD/MM/YY)      | To<br>(DD/MM/YY)        |                      | in brief |
|           |   |                     |  |                         |                         |                      |          |
|           |   |                     |  |                         |                         |                      |          |
|           |   |                     |  |                         |                         |                      |          |
| 11        | Total post qualification  | n experience in the | e relevant field   |                         |                         |                      |          |
| 12.       | Whether you are <b>prese</b> If yes, please provide th  |                     | ave earlier work   | <b>ed</b> in Ernet Indi | a <b>Yes /</b> I        | No                   |          |
| 13.       | Whether any of your re<br>If yes provide Name, D<br>He/She is working.  |                     | •  | ndia.                   | Yes / N                 | lo                   |          |
| 14.       | Additional Information, if any which you would like to mention in support of your suitability for the post. Enclose a separate sheet, if necessary. |                     |  |                         |                         |                      |          |
|           | DECLARATION   |                     |  |                         |                         |                      |          |
|           | I, hereby, solemnly docorrect to the best condidature will be ca  | of my knowledge     | and belief. I ag   | reed if any in          | formation fou           | nd falls m           |          |
| Place     | ::  |                     |  | Name of t               | :he Applicant_          |                      | _        |
|           |   |                     |  |                         | Signature               |                      |          |
| Date      | ·   |                     |  |                         |                         |                      |          |
|           |   |                     |  |                         | Tel.No                  |                      | _        |
|           |   |                     |  |                         |                         |                      |          |

Email \_\_\_\_\_