

(Application forwarded other than this format will be summarily rejected)

| A                                    | Name of the Pos                                  | st Applied fo | or        |        |                                 |                        |       |         |                              |  |  |
|--------------------------------------|--|---------------|-----------|--------|---------------------------------|------------------------|-------|---------|------------------------------|--|--|
| В                                    | Please Specify (put a mark in appropriate column |               |           |        |                                 | <b>Deputation</b> C    |       |         | Cont                         | ract appointment   |  |
| 1.                                   | Name of the Candidate                            |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      | (in block letters)                               |               |           |        |                                 |                        |       |         |                              |  |  |
| 2.                                   | Age & Date of Birth                              |               |           |        |                                 |                        |       |         |                              |  |  |
| 3.                                   | Sex  |               |           |        |                                 |                        |       |         |                              |  |  |
| 4.                                   | Religion: Caste:                                 |               |           |        |                                 | Whether SC/ST/0        |       |         |                              | C  |  |
| 5 a)                                 | Address for correspondence (with pin code)       |               |           |        |                                 | 5 b) Permanent Address |       |         |                              | Please affix oneself<br>attested recent<br>passport size<br>photograph |  |
|                                      | Telephone (Landline/Mobile)                      |               |           |        | :                               |                        |       |         |                              |  |  |
|                                      | Email address                                    |               |           |        | :                               |                        |       |         |                              |  |  |
| 6.                                   | Present Post                                     |               |           |        | :                               |                        |       |         |                              |  |  |
|                                      | Current Basic Pay                                |               |           |        | :                               |                        |       |         |                              |  |  |
|                                      | Name of Organiz                                  |               |           |        | :                               |                        |       |         |                              |  |  |
| 7 a).                                | Academic & Pro                                   | ofessional Q  | ualificat | ion fr | om                              | Graduatio              | n onv | vards ) |                              |  |  |
| Degree/Diploma University/Insti      |  |               |           |        |                                 | Subject                |       |         |                              | Year   |  |
| tution                               |  |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      |  |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      |  |               |           |        |                                 |                        |       |         |                              |  |  |
| 7 b). Computer Knowledge             |  |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      |  |               |           |        |                                 |                        |       |         |                              |  |  |
| <u> </u>                             |  |               |           |        | b) Total Years of Experience in |                        |       |         |                              | 8c) Total years of   |  |
|                                      |  |               |           |        | sec                             | tor/ similar           | proj  |         | experience in<br>Jalanidhi : |  |  |
| 8 d).                                | Details of Experience                            |               |           |        |                                 |                        |       |         |                              |  |  |
| <u> </u>                             | Post Held  |               | Period    |        |                                 | Organization           |       |         | Nat                          | ure of Duties  |  |
|                                      |  | From          | То        | )      |                                 |                        |       |         |                              |  |  |
|                                      |  |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      |  |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      |  |               | 1         |        |                                 |                        |       |         |                              |  |  |
| 9. Additional Qualification (if any) |  |               |           |        |                                 |                        |       |         |                              |  |  |
| 9.                                   | Additional Qualification (if any)                |               |           |        | :                               |                        |       |         |                              |  |  |
| 10.                                  | List of Training courses attended                |               |           |        | :                               |                        |       |         |                              |  |  |
| 11.                                  | Languages Known                                  |               |           |        | •                               | Read                   |       | Write   | e                            | Speak  |  |
| 11.                                  | English  |               |           |        |                                 | Read                   |       | ** 110  |                              | Бреак  |  |
|                                      | Malayalam and Hindi                              |               |           |        |                                 |                        |       |         |                              |  |  |
| 12.                                  | Any Documentation/Publication done (if           |               |           |        |                                 |                        |       |         |                              |  |  |
|                                      | yes, give details)                               |               |           |        |                                 |                        |       |         |                              |  |  |
| 13.                                  | Remarks (if appl                                 |               |           |        |                                 |                        |       |         |                              |  |  |

## **DECLARATION**

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any particular information given above being found false or incorrect, my candidature for the post is liable to be rejected and my service are liable to be terminated forthwith without any notice to me.

Place: Date: