PRESCRIBED PROFORMA FOR SUBMISSION OF APPLICATIONS ON DEPUTATION BASIS

	Notice No. the top right side of notice)		
File No.	the left side of vacancy notice)		
been sub	nst which application has mitted		
Choice of (wherever a			
Personal		_	
1.	Name	:	
2.	Gender	:	
3.	Service	:	
4.	Department	:	
5.	Category	:	
6.	Date of Birth	:	
7.	DITS (Date of entry into Time Scale)	:	
8.	Date of entry in Gr.B (wherever applicable)	:	
9.	Present Pay Level & Basic Pay	:	
10.	Date of holding Present Pay Scale/ Level	:	
11.	Present Designation & Railway/PSU	:	
12.	Contract Details	:	
	(a) Email ID	:	
	(b) Telephone (O)	:	
	(c) Telephone (R)	1:	

13. Educational Qualifications:-

(d) Mobile Number

S.No.	Qualification/Degree	Year/ Division	Institution/University, Place/ Country

S. No.		signation wace of posti		Grade					Fror	n	То
15. I S.No		ils of previo		eputation/ fo		gn as		ment	(if any)):- │⊤	
3.NO	'	Organisatio	on	Designation	M			FIOIII		"	O
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I certify that the details furnished by me above are true and I am eligible for the post as the criteria laid down in the vacancy notice.

	(Name and Signature of the applicant)
Place:	
Date:	

FORWARDING/ CERTIFICATION BY EMPLOYER

Certified that the information / details provided in the above application by the applicant are true and correct as per the facts available on record. He possesses educational qualifications and experience mentioned in vacancy circular. If selected, his relieving shall be subject to exigencies of work.

2.	It is also certified:-
(i)	That there is no vigilance/ disciplinary case or criminal case pending or contemplated against Shri
(ii)	That his integrity is certified.
(iii)	That his APAR dossier for the last five years, duly attested by a Competent Officer are enclosed.
(iv)	It is certified that no major/minor penalty has been imposed on him during last ten years.
(v)	That the cadre controlling authority has no objection to the consideration of the applicant for the post mentioned in this advertisement.
	Signature
	Name
	Mobile No
	Office Seal
Plac	ce:
Date	e: