	RAIL WHEEL	FACTORY, YE	ELAHA	NKA, BAN	GALURI	2 200 0	04	
	Notification	n No. RWF/NG-1/	157 (Me	echanical) Da	ated 28.09.	2019		
Name of the retired employee (in capital letters)				Father's Name				
				N				
Address			Mobile Number					
			Categ	ory applied	ror	pa	Affix your recent assport photograph duly self attested.	
			Email_ ID				dary son attootou.	
Date of birth (dd/mm/yyyy) (as per Matriculation Certificate) (Self-attested photocopy of Matriculation Certificate to be enclosed)			Age (as on 01.10.2019)					
			Years,Months andDays					
Date of retirement			Designation/Post at the time of retirement					
Sex:	(M/F)	Vationality :			Community: SC/ST/OBC/UR			
Emp. No		Whether worked in RWF		Pension Payment Order number				
		(Y	es/No)					
	Previous experience in t	he category appli	ed for (S	Separate she	et duly sig	ned car	n be attached)	
SI.		Unit	Year				Remarks if any	
No.	Designation			From	То			
(to	Personal marks of identification be filled compulsorily)							
Self-attested photocopies of		Service Certif	ice Certificate		Pensioner Identity Card.		Pension Payment Order	
		(Yes/No)		(Yes/No)		(Yes/No)		

## Declaration:-

I hereby declare that all the particulars given in this application are true and correct to the best of my knowledge and belief. If any information furnished is found to be incorrect or false at a later date, my application is liable to be rejected. Also, if it is found that at a later stage that my selection is found not valid by the RWF Administration for any reason, my services are liable to be terminated forthwith. I am also liable for necessary legal action to be taken by the RWF Administration, as deemed fit. I hereby declare that I will abide by all conditions stipulated for re-engagement in the notification and that I would maintain the confidentiality in the duties assigned to me during my re-engagement.

Place	Signature :
	Name :
Date	Name :