### TO BE FILLED IN BOLD ENGLISH CAPITAL LETTERS BY THE CANDIDATE ONLY

(\* marked fields are mandatory. Candidates are advised to fill up the detailed information in the prescribed format and at relevant place only. No separate sheet attached will be considered.)

Please affix passport size photograph and sign across

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### The Managing Director,

Maha Mumbai Metro (M<sup>3</sup>) Operation Corporation Ltd. & Metropolitan Commissioner, MMRDA New Administrative Building, 8<sup>th</sup> Floor, Bandra-Kurla Complex, Bandra (East), Mumbai - 400 051. MAHARASHTRA.

ır	ıdra	(Ea	st), Mumbai	i - 400 0	51. MA	HAR	AS	HTRA.						
	1.	*N	ame of Post	applied	for:-				,					
	2.	Mo	de of Selec	tion :-	(a) Noi	ninat	ion	/ <b>(b)</b> De	puta	tion /				
	3.	*C	andidate's F	Full Nam (Surn	ne : ame)			(Name)		(Mi	iddle	Name)		
	4.	*Candidate's Full Name :(Surname) (Name) (Middle Name)  *Date of Birth :* Yrs*Months.												
	5.	*G	ender : M/F	*Natio	nality :			*	Relig	gion:		_*Caste:		
	6.	*P	ermanent A	ddress :										
	7.	*C	orresponder	nce Add	ress :-									
	8.	*E	mail ID :											
	9.													
	11.	*E	ducational /	Professi	onal Q	ualific	atio	ons acqu	iired	:-				
S	Sr. N	0.	Details of Qualificat		onal			ear of assing		de/ centage	Boa	ard/Universit	y/Institute	_
	12.	* (	General Exp	erience §	gained	:-								
	Sr. No			Name of From To Total Type of Scale under duties			Nature of duties performed	Reasons for leaving.						

			Period		Post held &	Pay Band/CTC	Nature of	Reasons for
Sr.	Name of	From	То	Total	Type of	(Rs). With Pay	duties	leaving.
No	Organization			years	appointment	Scale under	performed	
					арропппсп	IDA/CDA	periorined	
						TOTAL		
						IUIAL		
L						omotions received		

\*Need detailed information i.e. post at the time of joining, promotions received, if any - at each stage during the total tenure.

13. \*Specific working experience gained as under:-

Sr. No.	Name of organization	Position /Designation	Period	no. of years
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•									
		Total No. of years	;						
		Department Name, No., Competent Au			:-				
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		parent department					-		
		Pay Scale with GI along with VI/VII		mmissior	,				
(u		A/IDA/Other Scal		)11111111SS1O1	:-				
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26. Names of two reputed references except political

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	upport of statement duly self attested out whichever not applicable)			
i.	Age Proof (Birth Certificate/SLC)	:-	Yes/No	
ii.	Educational/Professional qualifications	:-	Yes/No (Nos)	
	(Passing certificate necessary)			
iii.	Experience certificates	:-	Yes/No (Nos )	

and relatives preferably Gazetted Officers in the Class I rank :- 1.

NOC issued by parent Department :-

#### **DECLARATION:**

I hereby declare that all the statements made by me in this application form are true and correct to the best of my knowledge and belief that nothing has been concealed or suppressed. <u>I have enclosed necessary documents/certificates to this effect</u>. I also understand that in case, any of my statements is found untrue during any stage of recruitment and thereafter. I shall be disqualified for the post applied for and I shall be liable for any penal action.

Yes/No

I have read the advertisement and the relevant GRs mentioned hereinabove and made aware myself about all the terms & conditions stipulated therein and affirm to abide by them. I affirm I fulfill the requisite criteria that that no any Departmental Enquiry is live/pending/proposed against me as on today. I further affirm that there are No Dues, No Legal Proceedings of any nature are pending against me as of date.

Date :	
Place :	Signature of candidate with name & date

## (To be given on Company's letterhead)

		Date:			
To, The Managing Director, Maha Mumbai Metro (M³) Operation Corporation L Metropolitan Commissioner, MMRDA New Administrative Building, 8 <sup>th</sup> Floor, Bandra-Kurla Complex, Bandra (East), Mumbai - 400 051. MAHARASHTRA.	td. &				
No Objection C	Certificate				
This is to certify that Shri/Smt./Kumar working in this (post) in the pay scale of basic is Rs & GP in Rs	rioffice fro	om	to	till	is date as
basic is Rs & GP in Rs birth is	as ]	per our official	record	_ navi	ng present ner date of
Further it is certified that he/she h MMMOCL on deputation/nomination basis a as per prevailing norms of deputation. He/prescribed criteria as specified in the advertis in MMMOCL.	nd we fou /She fulfil	nd him/her is e ls the qualific	ntitled ation,	to the	e said post rience and
We ensure that if he/she selected, within 30 days.	we will sp	pare the service	es of	Shri/S	Smt./Kum.
We also certify that No Departmenta he/she never been penalized in the last 5 years		is pending, in	nitiated	d, pro	posed and
This NOC is issued on his/her request.					
Place:					

Date:

Authorized Signatory Name Company seal with address Phone No/Email ID

# **DECLARATION**

### FORM-A (See Rule 4)

Shri	/ Smt / Kum
Son	/ daughter / wife of Shri
Aged	d years, resident of
Distr	rict City
Do h	ereby declare as follows :
1)	That I have filled my application for the post of
2)	I have (Number) living children as on today
	Out of which No. of children born after 28 March – 2005 is
-	I am aware that, If any total no. of living children are more than two due to the children born after 28 March – 2006, I am liable to be disqualified for the same post.
Plac Date	