COMMON APPLICATION FORM FOR APPOINTMENT BY DEPUTATION (INCLUDING SHORT TERM CONTRACT)/FOREIGN SERVICE/ABSORPTION

1)	Name of applicant (in capital letters)	:
2)	Date of birth (enclose self attested copy of supporting document like HSLC, Birth Certificate, etc.)	:
3)	Address for correspondence including contact number	
4)	Name of post applied	:
5)	Designation of present post held	:
6)	Name of service/department	:
7)	Present scale of pay/level in pay matrix	:
8)	Date of joining the present grade/post on regular basis	:
9)	Educational qualification (enclose self attested copy of certificates)	:
10)	Please state whether or not the educational and other qualifications/experience prescribed for the post in the recruitment rules/vacancy circular are satisfied by the applicant	;
	Qualifications/experience required	Qualifications/experience possessed by the official
	Essential i) ii) iii)	
	Desirable i) ii)	

11)	Nature of present permanent/regular temporary, contract	or ad h	nt (i.e. oc or	:			
12)	Please state whet employment is under employer: a) Central Govern b) State Govern c) Universities d) Autonomous e) Government f) Others	ollowing	:				
13)	Any additional information which you would like to mention in support of your suitability for the post (This may, among other things, include (i) additional academic qualifications (ii) professional training (iii) work experience, etc. Separate sheet may be enclosed if necessary)						
14)	Whether penalty, if any, was imposed on the applicant during a period of 5 years preceding last date for submission of application? If any, enclose a copy of the order of imposition of penalty by the Disciplinary Authority.						
15)	Details of post(s) held in chronological order (enclose separate sheet, if necessary)						
S1.	Name of post	Dura	tion		Nature of duties		
No.	held	From	То			444105	

The information furnished above is/are correct to the best of my knowledge and nothing has been suppressed. I understand that in case of my selection, if any information furnished above is found to be false or misrepresented at a later stage, my selection is liable to be cancelled with the approval of the Competent Authority.

Date:	Name & signature of applicant

CERTIFICATE OF THE ADMINISTRATIVE DEPARTMENT/CADRE CONTROLLING AUTHORITY

Certified that the particulars furnished by the officer are correct as per the service records and the department has no objection for appointment of the officer on deputation (including short term contract)/deputation on foreign service/absorption (please select the appropriate one).

Date:

Signature of an officer not below the rank of Under Secretary in the cadre controlling authority