

**APPLICATION FORM FOR THE POST OF CONSULTANT ON CONTRACT
BASIS THROUGH WALK-IN-INTERVIEW**

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1. Post applied for :
2. Name of the Candidate
(As per matriculation certificate) :
3. Father's Name: :
4. Date of Birth:
(As per matriculation certificate) :
5. Age as on the last date of
receipt of application :
6. Gender (Male/Female) :
7. Postal Address for correspondence :
:
:Pincode.....
8. Permanent :
:
:Pincode.....
9. Mobile No. :
10. Email-ID :
11. Educational/Professional qualifications (in case of insufficient space, please attached separate sheet duly signed by the applicant) :

Sl. No.	Exam/Degree Passed	School/ College/ University	Subject Taken	Year of Passing	Class/Division & %age

12. Experience (in case of insufficient space, please attached separate sheet duly signed by the applicant) :

Sl. No.	Name of the Employer/Organisation	Post Held Start from the post last held	Period from	Period to	Nature of duties (in brief)

13. Last pay drawn :

14. Any other information :

(Signature of candidate)

DECLARATION

- i. I hereby declare that i fulfil all the conditions of eligibility regarding age limits, educational qualifications and experience etc, prescribed to the post on contractual appointment.
- ii. I further declare that all statements made in this application are true, compete and correct to the best of my knowledge and belief i understand that in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the interview, my candidature is able to be cancelled.

Place:

Date:

Signature of the Candidate
(unsigned application will be rejected)

Note:

The application without supporting documents pertaining to education/Professional Qualification (s) /Experience Certificate shall liable to be rejected.