Annexure-A

APF	LICATION FOR THE POST OF		
			Photo
		_	
			Signature
1.	Mode of recruitment, viz. Deputation/Direct Contract (Please specify wherever applicable)	:	<u> </u>
2.	Name of the Candidate (in Block letters) (with rank in case of officers from Indian Army, Navy, Airforce)	:	-
3.	Father's/Husband's Name	:	
4.	(a) Date of Birth in Christian era (in dd/mm/yyyy format)	:	
	(b) Age as on last date for receipt of Application	:	
5.	Date of retirement/ release from Parent Department	:	
6.	Permanent Address (with PIN code)	:	
7.	Address for Correspondence (with PIN code)	:	
8.	E-mail Address, Phone Number (Office, Residence and Mobile)	:	<u> </u>
9.	Category (Gen/SC/ST/OBC/OTHERS)	:	

10. Educational Qualification (attach a separate sheet duly attested by you if the space is insufficient).

Sl.	Exam	Year	Subjects	Name of	Board/	Percentage of marks
No.	Passed		offered	Institute	University	obtained
	а 1					
8						

Page **13** of **20**

	1 1	
Langer and the second s	 	

11. Details of experience (in chronological order). Enclose a separate sheet, duly authenticated by your signatures, if the space below is insufficient.

SI. No.		1.	2.	3.	4.	5.
a. Name of Organization					. T.)	
b. Post held						
c. Period of Tenure with dates (in dd/mm/yyyy format)	From To					
d. Whether worked/worki Permanent /Regular or Temporary/Quasi Permane Deputation or on Contract b						
please indicate the post scale held on regular / su basis in the parent de						
f. Brief description of duties	Brief description of duties					
g. Scale of Pay and Basic Pay the Pay Scale under CDA pa been revised after the recommendations, please indicate the Pay Band and Pay)					Ε	
h. Whether Scale of Pay on C pattern or any other DA Please specify						

12. Whether Educational and other qualifications required for the post are satisfied. (If any qualification has been treated as equivalent to the one prescribed in the Rules, state the authority for the same)

Qualification/
required for the postExperience
possessed by the officerEssentialEducational

Me

Page 14 of 20

Qualification:	
Desirable Educational	
Qualification:	
Essential Experience:	
Desirable Experience:	
of entries made by yo	
the requirements of the	e post
4. Nature of present	
Permanent / Regular/ Temporary/ Quasi-Pe Deputation or on Contr	
5. In case the present em	ployment is held on :
Deputation / on Con state	
(a) The date/ period Deputation / on Co	
(b) Name and addre Organization to wh	
(c) Whether the Pare (Please indicate th relevant column)	ent Department is e name against the
i Central Governn	nent :
	nt :
	Government Public Sector Undertaking :
iv Central / State	University :
	utonomous Body :
	pecify :
ine encoded and one of the state of the stat	
(d) Name of the Post DA pattern held by substantive basis Department.	•
 Additional details about Please state whether organization against the 	working under (indicate the name and address of the
a Central Government	:

M

b. State Government

c. Central / State Government Public Sector Undertaking:

:

d. Central / State University

e. Central / State Autonomous Body :

f. Others, please specify : _____

17. a) Whether the present Pay Scale in your parent department has been granted under Modified Assured Career Progression (MACP), Assured Career Scheme Progression Scheme, Time Scale, Personal Upgradation, Financial upgradation, Insitu Up gradation, Non functional Upgradation, Non-functional Grade. Adhoc-promotion or any other similar scheme of your parent Department.

> (b) If yes, please specify the substantive post with pay scale held by you in your :_____ Parent Department.

- 18. If working or belonging to the Public Sector Undertaking, please indicate the Grade in which you are working along with :_____ the pay scale (Whether E-1, E-2, E-3, E-4, E-5, E-6, E-7, E-8, or E-9, etc.).
- 19. Total emoluments per month drawn (Please indicate the detailed break-up and also enclose a self-attested copy of : _____ the latest pay slip).
- 20. Additional information, if any, which you would like to mention in support of your suitability for the post [Enclose a separate sheet, dulv authenticated by your signatures, if the space is insufficient].
- 21. Whether applied for the similar post in NHIDCL in the last two years. If so, please indicate the post applied for, date of Advertisement and date of interview, if any.
- 22. Details of earlier service in NHIDCL, if any

S.No.	Name	of	Nature	of	Tenur	e/pe	eriod	with	Scale	Place(s)	Nature	of
	post		employme	ent	dates	in	dd/mn	n/yyyy	of pay	of	duties/	
						٨	D			Р	age 16 of 2	20
						VY	nc					
			ð				-	-				

Yes / No

:_____

	(Deputation/ Contract)	format		posting	
		From	То		
×.		-			-

Date:_____

Signature:_____

Place:_____

Name:_____

Mz

DECLARATION

I have carefully gone through the vacancy circular / advertisement and I am well aware that the Application Form / Curriculum Vitae duly supported by documents submitted by me will also be assessed by the Selection Committee at the time of selection for the post.

I also hereby solemnly declare and undertake that all information furnished by me is true, correct and complete to the best of my knowledge and belief. I undertake that, if at any stage of selection or even after selection, any of the information furnished by me is found to be false, incorrect or misleading, then my candidature / appointment / services shall stand cancelled / terminated without assigning any reasons there for.

I am willing to serve anywhere in the North East Region i.e anywhere in the States of Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim, Tripura, and in the Union Territory of J&K, Ladakh and Andaman & Nicobar Islands.

Date :_____

Signature

Place:

Name

M-___

CERTIFICATE BY THE EMPLOYER, IF APPLYING ON DEPUTATION BASIS

(i)	Certificate that Sh holds a permanent post of in the O/o since						
	· · · · · · · · · · · · · · · · · · ·						
(ii)	The integrity of Shis beyond doubt.						
(iii)	He has submitted his application to this office on						
(iv)	The Pay Scale/ Pay Band + Grade Pay of the post held by the officer in his parent Department (without NFU/NFSG/ACP/MACP/TS/Personal upgradation etc) is as under:-						
(v)	This office has No Objection in case the application of Sh is considered for appointment to the post of on Deputation in NHIDCL. Further, it is certified that Sh shall be relieved immediately in case of his/her selection in NHIDCL.						
(vi)	The information given by Sh in the application proforma has been verified with reference to his/her service records and found correct.						
(vii)	No Vigilance or Disciplinary case is pending or contemplated against the official concerned during last 10 years.						
(viii)	Up-to date ACR/APAR dossier of the concerned official for the last five years are enclosed herewith.						

Date:

Place:

Signature Head of Office/Department

M