

**APPLICATION FORMAT****Annexure 'B'**

Advt. No..... Dated : .....

APPLICATION FOR THE POSITION OF \_\_\_\_\_

Paste a recent  
Passport size  
Photograph

1.	NAME (IN CAPITAL)	
2.	FATHER'S/MOTHER'S/HUSBAND NAME	
3.	GENDER	
4.	NATIONALITY	
5.	DATE OF BIRTH(DD/MM/YYYY) AGE IN YEARS/MONTHS. (AS ON THE DATE OF ADVERTISEMENT)	
6.	WHETHER BELONG TO SC/ST/OBC/PwBD/OTHERS (Mention category) (Certificate enclosed -Yes/No)	
7.	IF PwBD, PLEASE INDICATE WHETHER- VH/HH/OH (Certificate enclosed -Yes/No)	
8.	EXTENT OF DISABILITY PERCENTAGE (Certificate enclosed -Yes/No)	
9.	HIGHEST QUALIFICATION	
10.	TOTAL POST QUALIFICATION WORK EXPERIENCE (AS ON THE DATE OF ADVERTISEMENT)	
11.	DATE OF RETIREMENT/LEAVING THE LAST EMPLOYMENT	
I	NAME OF THE COMPANY/DEPARTMENT (WORKING/RETIRED)	
II	WHETHER CPSE/STATE PSU/GOVT. DEPARTMENT/REPUTED/LARGE PRIVATE SECTOR ORGANISATION	
III	POST CURRENTLY HELD ON REGULAR (SUBSTATIVE) BASIS WITH PAY SCALE, LEVEL AND GRADE PAY (UNDER IDA & CDA PAY SCALES) OR ON THE DATE OF RETIREMENT/SEPARATION	

Contd....Annexure -B

12.	PRESENT ADDRESS FOR COMMUNICATION	
13.	PERMANENT ADDRESS	
14.	TELEPHONE/MOBILE NO.	
15.	E-MAIL ID	
16.	AADHAAR NUMBER	
17.	PAN NUMBER	

15. EDUCATIONAL QUALIFICATIONS:

Sl. No.	Qualifications from 10 <sup>th</sup> Class onwards	% of marks obtained/CGPA	Year of passing	Name of School/College	Affiliated institute/ University

16. PARTICULARS OF EXPERIENCE:

Sl. No.	Name of the Company/ Organization	Central Govt./ State Govt./ PSU/ Autonomous/ Private	Post held	Period of Employment		Pay scale / Level & Grade Pay in case of PSUs/ Govt. Depts.	CTC (in Rs.) (In other cases.)	Major Responsibilities
				From	To			

Contd- Annexure B...

Declaration:

I, the undersigned, certify that to the best of my knowledge and belief, this application correctly describes myself, my qualifications, and my experience. I understand that any wilful misstatement described herein may lead to my disqualification or dismissal, if engaged.

I, the undersigned, also understand that the engagement is purely temporary and contractual and on Fixed Term Basis and it is not against any Permanent vacancy and this engagement will not give me any claim for regular/permanent employment in the company.

Date:

Place:

Signature of candidate

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[Self-Attested Documents to be enclosed (whichever applicable)]

1. Valid document evidencing date of birth of the candidate (secondary/Matriculation School Certificate/Birth Certificate).
2. Educational certificates-Mark sheets & Degree (Diploma, Graduation, Post-Graduation) etc.
3. Work experience-
  - a) Joining-Relieving Letter from Company/Organization.
  - b) Experience/Service Certificate/Salary statement/Bank Statement issued by Company/Organization (it should indicate date of joining and date of relieving from each organization where worked).
  - c) Salary certificate together with ITR or Form-16 A issued by present/past employer(s).
4. The candidate is required to fill up all the columns and wherever no information is to be furnished, N/A or Nil whatsoever is applicable should be mentioned. In complete and improperly filled applications are liable to be rejected. No further correspondence will be entertained in this regard.
5. In case of space becomes a constraint, the information may be attached in a separate sheet as prescribed in the application format.

Enclosures :- Tick the below mentioned photocopies of the documents that has been enclosed along with the application.

Sl.	Documents	Tick if enclosed
1.	Matriculation (10 <sup>th</sup> ) Passing Certificate & Mark sheet as Proof of date of birth	
2	Senior Secondary (12 <sup>th</sup> ) Passing Certificate & Mark sheet	
3	<b>Sr. Project Manager (Electro Optics System Design)</b> Master's Degree in Optical Engineering, Laser & Electro Optical Engineering, Optics and Optoelectronics OR Bachelor's Degree in Optics & Optoelectronics, Optical Engineering with 01 year work experience. For B.Tech 01 year work Experience in optical system design, experience on working with ZEMAX design tool.	
4	<b>Sr. Project Engineer (Mechanical Design)</b> -Degree of BE or B.Tech (Mechanical Engg) -01 Plus years of Experience in developing relevant mechanical designs & successfully realizing as well as validating them. Experience certificate of CAD	
5	<b>Sr. Project Engineer (Electronics Hardware Design)</b> Degree of BE/ B-Tech in Electronics, Electronics & Communication. Minimum 01 year experience certificate for Electronics Board Design, Knowledge of Cadence SCH capture & PCB design tools	
6	<b>Sr. Project Engineer (Robotics Firmware &amp; Control)</b> Degree of BE/ B-Tech in Electronics, Electronics & Instrumentation, Mechatronics, Computers Minimum 01 year of experience certificate in developing relevant coding applications successfully realizing as well as validating them. Certificate of experience in Architecting & realizing firmware for motion control systems, robotic subsystems involving interfacing micro controllers & GPU processors with mechatronic components, sensors & actuators. Experience certificate in microcontroller firmware coding and debugging along with relevant IDE tools	
7	<b>Sr. Project Engineer (Embedded)</b> Degree of BE/ B.Tech Electronics, Electronics & Communications	

Contd....Annexure -B

8	<b>Sr. Project Engineer (FPGA Design)</b>	
	Degree of BE/ B.Tech in Electronics, Electronics & Communication, RTL Programming skills in VHDA, Verilog	
9	<b>Project Engineer (Software)</b>	
	Degree of BE/ B.Tech in Computer Science having programming skills C, C++	
10	<b>Deputy Project Manager (Finance &amp; Accounts)</b>	
	Graduation Certificate of any discipline & CA Final Passout (from ICAI) or CMA Final Passout (from ICAI)	
	Certificate of Experience (Minimum 01 year) Post Qualification excluding Articleship	
11	<b>Junior Project Manager (Finance &amp; Accounts)</b>	
	Degree of B.COM or M.COM or CA intermediate (from ICAI) or CMA Intermediate (from ICAI)	
	Minimum 08 years Post Qualification Experience certificate for B. COM	
	Minimum 05 years Post Qualification Experience Certificate for M. COM	
	Minimum 05 years Post Qualification Experience Certificate for CA (Intermediate)/ CMA (Intermediate) in any organization (excluding Articleship)	
12	Caste/ Disability certificate (if applicable), OBC (NCL)/ EWS/SC/ST/PwBD certificate should be latest and strictly in the prescribed formats. OBC (NCL) certificate should be issued on after 01.01.2024 and EWS certificate for the years 2022-23 or the present financial year.	
13	No Objection Certificate (if applicable) for candidates working in PSUs/ Government/ Quasi Government organizations.	

Date:  
Place:

Signature of candidate

## PREScribed PROFORMAE

### Performa-I

**The form of certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under the Government of India**

This is to certify that Shri/Shrimati/Kumari\* .....  
son/daughter\* of ..... of village/town\* .....  
..... in District/Division\* ..... of the  
State/Union Territory\* ..... belongs to the ..... caste/tribe\* which is  
recognised as a Scheduled Caste/Scheduled Tribe\* under:—

- @ The Constitution (Scheduled Castes) Order, 1950
- @ The Constitution (Scheduled Tribes) Order, 1950
- @ The Constitution (Scheduled Castes) Union Territories Order, 1951
- @ The Constitution (Scheduled Tribes) Union Territories Order, 1951

[as amended by the Scheduled Castes and Scheduled Tribes List (Modification) Order, 1956; the Bombay Reorganisation Act, 1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganisation) Act, 1971, the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976., the State of Mizoram Act, 1986, the State of Arunachal Pradesh Act, 1986 and the Goa, Daman and Diu (Reorganisation) Act, 1987.]

- @ The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956
- @ The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976
- @ The Constitution (Dadar and Nagar Haveli) Scheduled Castes Order, 1962
- @ The Constitution (Dadar and Nagar Haveli) Scheduled Tribes Order, 1962
- @ The Constitution (Pondicherry) Scheduled Castes Order, 1964
- @ The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967
- @ The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968
- @ The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968
- @ The Constitution (Nagaland) Scheduled Tribes Order, 1970
- @ The Constitution (Sikkim) Scheduled Castes Order, 1978
- @ The Constitution (Sikkim) Scheduled Tribes Order, 1978
- @ The Constitution (Jammu & Kashmir) Scheduled Tribes Order, 1989
- @ The Constitution (SC) Order (Amendment) Act, 1990
- @ The Constitution (ST) Order (Amendment) Act, 1991
- @ The Constitution (ST) Order (Second Amendment) Act, 1991
- @ The Scheduled Castes and Scheduled Tribes Orders (Amendment) Act 2002
- @ The Constitution (Scheduled Castes) Order (Amendment) Act, 2002
- @ The Constitution (Scheduled Castes and Scheduled Tribes) Orders (Amendment) Act, 2002
- @ The Constitution (Scheduled Castes) Orders (Second Amendment) Act, 2002

% 2. Applicable in the case of Scheduled Castes/Scheduled Tribes persons who have migrated from one State/Union Territory Administration to another.

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribes certificate issued to Shri/Shrimati\*..... Father/Mother of Shri/Shrimati/Kumari ..... of ..... village/town\* ..... in District/Division\*..... of the State/Union Territory\*..... who belongs to the caste/tribe\* which is recognised as a Scheduled Caste/Scheduled Tribe in the State/Union Territory\* of ..... issued by the ..... dated .....

% 3. Shri/Shrimati/Kumari\*..... and/or\* his/her\* family ordinarily resides in village/town\*..... of..... District/Division\* of the State/Union Territory\* of.....

Signature.....  
\*\*Designation.....

(With Seal of Office)  
State/Union Territory\*

Place: .....

Date: .....

\*Please delete the words which are not applicable.

@Please quote specific Presidential Order.

% Delete the paragraph which is not applicable.

NOTE: The term "ordinarily reside (s)" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

\*\*List of authorities empowered to issue Scheduled Caste/Scheduled Tribe Certificate.

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/† Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner.  
†(not below of the rank of 1st Class Stipendiary Magistrate).
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar.
- (iv) Sub Divisional Officer of the area where the candidate and/or his/her family normally resides.
- (v) Administrator/Secretary to Administrator/Development Officer(Lakshadweep)

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING  
FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

[G.I., Dept. of Per & Trg., O..M. No. 36033/28/94-Estt (Res), dated 2-7-1997.]

This to certify that \_\_\_\_\_, son of \_\_\_\_\_, of  
Village \_\_\_\_\_ District / Division \_\_\_\_\_ in the \_\_\_\_\_  
State \_\_\_\_\_ belongs to the \_\_\_\_\_ Community which is recognized  
as a Backward Class under-

- \*(i) Government of India, Ministry of Welfare, Resolution No. 12011/68/93-BCC (C), dated the 10<sup>th</sup> September, 1993, published in the Gazette of India, Extraordinary, Part-I, Selection I, No 186, dated the 13<sup>th</sup> September, 1993.
- \*(ii) Government of India, Ministry of Welfare, Resolution No. 12011/9/94-BCC, dated the 19<sup>th</sup> October, 1994, published in the Gazette of India, Extraordinary, Part-I, Selection I, No. 163, dated the 20<sup>th</sup> October, 1994.
- \*(iii) Government of India, Ministry of Welfare, Resolution No. 12011/7/95-BCC, dated the 24<sup>th</sup> May, 1995, published in the Gazette of India, Extraordinary, Part-I, Selection I, No. 88, dated the 25<sup>th</sup> May, 1995.
- \*(iv) Government of India, Ministry of Welfare, Resolution No. 12011/44/96-BCC, dated the 6<sup>th</sup> December, 1996, published in the Gazette of India, Extraordinary, Part-I, Selection I, No. 210, dated the 11<sup>th</sup> December, 1996.

Shri \_\_\_\_\_ and / or his family ordinarily reside(s) in the  
\_\_\_\_\_ District / Division of the \_\_\_\_\_ State. This is also to  
certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in column  
3 of the Schedule to the Government of India. Department of Personnel and Training. O.M No  
36012/22/93- Estt. (SCT), dated 8-9-1993.

District Magistrate,  
Deputy Commissioner, etc

Dated:

SEAL

\*Strike out whichever is not applicable

N.B.- (a) The term 'Ordinarily used will have the same meaning as in Section 20 of the  
Representation of the people's Act, 1950

(b) The authorities competent to issue caste certificates are indicated below:-

- (i) District Magistrate / Additional Magistrate/Collector/Deputy Commissioner/ Additional  
Deputy Commissioner/Deputy Collector/First Class Stipendiary Magistrate/Sub-  
Division Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant  
Commissioner (not below the rank of first Class Stipendiary Magistrate).
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency  
Magistrate.
- (iii) Revenue Officer not below the rank of Tehsildar, and
- (iv) Sub-Division Officer of the area where the candidate and/or his family resides.

# ANNEXURE – I

NAME & ADDRESS OF THE INSTITUTE / HOSPITAL :

Certificate No.

Date :

## DISABILITY CERTIFICATE

Recent photograph of the candidate showing the disability duly attested by the Chairperson of the Medical Board

This is certified that Shri/Smt/Kum.....Son/wife/daughter of Shri ..... age..... sex .....identification mark(s) .....is suffering from permanent disability of following category :

1.

A. Locomotor or cerebral palsy :

- |       |  |                      |
|-------|--|----------------------|
| (i)   | BL-Both legs affected but not arms                   |                      |
| (ii)  | BA-Both arms affected                                | (a) Impaired reach   |
|       |  | (b) Weakness of grip |
| (iii) | BLA-Both legs and both arms affected                 |                      |
| (iv)  | OL – One leg affected (right or left)                | (a) Impaired reach   |
|       |  | (b) Weakness of grip |
|       |  | (c) Ataxic           |
| (v)   | OA – One arm affected                                | (a) Impaired reach   |
|       |  | (b) Weakness of grip |
|       |  | (c) Ataxic           |
| (vi)  | BH – Stiff back and hips (can not sit or stoop)      |                      |
| (vii) | MW-Muscular weakness and limited physical endurance. |                      |

B. Blindness or Low Vision

- (i) B-Blind  
(ii) PB – Partially Blind

C. Hearing impairment :

- (i) D-Deaf  
(ii) PD-Partially Deaf

(Delete the category whichever is not applicable)

2. This condition is progressive/non progressive/likely to improve/not likely to improve. Re-assessment of this case is not recommended / is recommended after a period of .....years.....months\*.

3. Percentage of disability is his/her case is .... percent.

4. Shri/Smt./Kum.....meets the following physical requirements for discharge of his/her duties.

- |        |   |        |
|--------|---|--------|
| (i)    | F-can perform work by manipulating with fingers | Yes/No |
| (ii)   | PP-can perform work by pulling and pushing      | Yes/No |
| (iii)  | L-can perform work by lifting                   | Yes/No |
| (iv)   | KC-can perform work by kneeling and crouching   | Yes/No |
| (v)    | B-can perform work by bending                   | Yes/No |
| (vi)   | S-can perform work by sitting                   | Yes/No |
| (vii)  | ST-can perform work by standing                 | Yes/No |
| (viii) | W-can perform work by walking                   | Yes/No |
| (ix)   | SE-can perform work by seeing                   | Yes/No |
| (x)    | H-can perform work by hearing/speaking          | Yes/No |
| (xi)   | RW-can perform work by reading and writing      | Yes/No |

(Dr.....)  
Member  
Medical Board

(Dr.....)  
Member  
Medical Board

(Dr.....)  
Chairperson  
Medical Board

Countersigned by the  
Medical Superintendent/CMO/Head of Hospital (with seal)

\*strike out whichever is not applicable.



**Proforma-IX**

**Government of.....**

**(Name & Address of the authority issuing the certificate)**

**INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY  
ECONOMICALLY WEAKER SECTIONS**

Certificate No.....

Date:.....

VALID FOR THE YEAR .....

This is to certify that Shri/Smt./Kumari .....  
son/daughter/wife of ..... permanent resident of,  
..... Village/Street, ..... Post Office,  
.....District..... in the State/Union  
Territory..... Pin Code.....whose photograph  
is attested below belongs to Economically Weaker Sections, since  
the gross annual income\* of his/her family\*\* is below Rs. 8 lakh  
(Rupees Eight Lakh only) for the financial year ..... His/her  
family does not own or possess any of the following assets\*\*\* :

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in. areas other than the notified municipalities.

2. Shri/Smt./Kumari ..... belongs to the .....  
caste which is not recognized as a Scheduled Caste, Scheduled  
Tribe and Other Backward Classes (Central List).

Signature with seal of Office.....

Name.....

Designation.....

Recent  
passport size  
attested  
photograph of  
the applicant

**\*Note 1:** Income covered all sources i.e. salary, agriculture, business, profession, etc.

**\*\*Note 2:** The term '**Family**' for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

**\*\*\*Note 3:** The property held by a 'Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

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