



Affix your recent
passport size
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across

APPLICATION FORMAT FOR THE POST OF CONSULTANT

Tick any one : Consultant-I Consultant II

1. Name of the candidate in full (In block letters) :

a. Title
(Mr./Ms./Mrs./Dr.)

b. First Name

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c. Surname

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2. Father's Name (In block letters) :

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3. Permanent Address (In block letters) :

Pin:

Mobile
No.

4. Address for Communication (In block letters) :

Pin:

Mobile
No.

Email ID (in capital letters) : _____

5. Date of Birth & Age : DOB: _____, Age: _____ years _____ months _____ days

6. Gender (please put (✓) mark) : Male Female

7. Marital Status (Married/ Unmarried) :

8. Whether belong to SC/ST/OBC/PH (mention details) : _____

9. Religion : _____

10. Aadhar No. : _____

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11. Educational qualifications (From SSC onwards) :

Sl. No.	Examination passed with group	Subjects	Board / University	Period		Percent-age	Division/ Grade
				From dd-mm-yy	To dd-mm-yy		

12. Experience (with Organization name and period of experience) :

Sl. No.	Name of the post/ position	Department/ Institution/ Organisation	Emoluments	Period		Total Years/ Months/ Days
				From dd-mm-yy	To dd-mm-yy	

13. Nature of duties performed : (In Brief)

14. Languages known :

- a. To speak : _____
- b. To write : _____
- c. To read : _____

15. Details of previous Consultancy, if any :

16. Additional Information, if any :

DECLARATION

I, hereby declare that the information furnished in the application is true, complete and correct to the best of my knowledge and belief. I am fully aware that in the event of any of the above information furnished by me being found false or incorrect at any stage, my candidature/ appointment is liable to be summarily cancelled/ terminated without any notice or compensation.

Place : _____

Signature of the Candidate : _____

Date : _____

Name (In block letters) : _____

