

9. DATE OF INITIAL APPOINTMENT AND DESIGNATION:

10. DATE OF PROMOTION AND DESIGNATION ON PROMOTION:

11. EDUCATIONAL QUALIFICATION:

Name of the examination/ degree	Name of the Board/ university	Marks obtained	Percentage	Year of passing

12. PROFESSIONAL QUALIFICATION (any in-service diploma/certificate course completed):

.....
.....
.....

12. LIST OF ENCLOSURES:

(i)

(ii)

(iii)

(iv)

(v)

(vi)

(vii)

(viii)

(ix)

I hereby declare that the above contents mentioned in the application form are true to the best of my knowledge and belief. I shall be responsible/liable for any consequence for false information.

Date: __/__/____

Place: _____

Signature of the applicant

Countersigned by:

**Head of Office/HoD
(Seal)**