

Deputation/Absorption/ Reemployment basis at MMS, Kolkata

1. Name and postal address (in Block Letters) with Telephone No.:
2. Date of Birth (in Christian Era):
3. Date of retirement under Central Govt. Rules:
4. Educational qualifications:
(Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient)
5.
 - a. Do you hold analogous post on regular basis in the parent cadre or department:
 - b. Do you possess three years' regular service in posts in Pay Level 1 of Pay Matrix as per 7th CPC or equivalent; if yes, Name of the post held:
 - c. Do you possess a valid driving license; if yes, enclose copy:
 - d. Do you possess knowledge of Motor Mechanism:
 - e. Do you possess experience of Driving Light and Heavy motor vehicle for at least three years; If yes, enclose the relevant documents:
 - f. Do you possess at least three years service experience as Home Guard/ Civil volunteers:
6. Details of employment, in chronological order (Stating from entry in Central Government Service). Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient:

Office/ Organization	Post held with scale of pay	Period of service		Basic Pay and Pay Scale (Pre-revised)			Basic Pay (Revised) with Pay Level in Pay Matrix		Nature of appointment whether regular/ ad- hoc/deputation
		from	to	Pay Band	Basic Pay	Grade Pay	Pay Level	Basic Pay	
1	2	3	4	5	6	7	8	9	10

7. Nature of present employment, i.e ad-hoc or temporary or permanent:
8. In case the present employment is held on deputation please state:-
 - a) The date of initial appointment:
 - b) Period of appointment on deputation:
 - c) Name of parent office/Organization to which you belong:
9. Are you in revised scale of pay? If yes, give the date from which the revision took place and also indicate the pre-revised scale:

Date	Pay Scale (pre-revised)	Basic pay (pre-revised)	Date of revision of pay	Revised scale of pay, Pay Matrix Level as per 7 th CPC	Revised basic pay

10. Total emoluments drawn per month in Rs.:
11. Additional information, if any, which you would like to mention in support of your suitability for the post:
(Enclose a separate sheet if the space is insufficient)
12. Full postal address of forwarding authority with name & telephone no.:
13. Whether belongs to SC/ST:
14. Remarks:

Note: The candidates who apply for the post will not be allowed to withdraw their candidature subsequently.

Signature of the Candidate: _____

Name of the Official: _____

Full address of the Office: _____

Telephone No./Fax No.: _____

Station: _____

Date: _____

Certificate to be given by the authorized signatory of the parent office

Certified that the information/details provided in the above application by the applicant are true and correct as per the facts available on records. He/She possesses educational qualifications and experience mentioned in vacancy circular. If selected, he/she will be relieved immediately.

Signature: _____
Name & Designation: _____
Telephone No.: _____
Office Seal: _____

ANNEXURE-II

(Certificate To Be Furnished By The Employer/Head of Office/Forwarding Authority)

1. Certified that the particulars furnished by _____ are true and correct as per the facts available on the records. He/she possesses the educational qualifications and experience mentioned in the vacancy circular.

2. Also certified that:-

- I. There is no vigilance or disciplinary case either pending/contemplated against Shri/Smt. _____
- II. His/Her integrity is certified.
- III. His/Her CR Dossier in original is enclosed/ photocopies of the ACRs for the last 5 years duly attested by an officer of the rank of Under Secretary to the Govt. of India or above are enclosed (wherever applicable).
- IV. No major/ minor penalty has been imposed on him/her during the last 10 years*
A list of major/ minor penalties imposed on him/her during the last 10 years is enclosed.*
- V. That the cadre controlling authority has no objection to the consideration of the applicant for the post mentioned in this advertisement and if selected, he will be relieved immediately to join the post.

Signature: _____
Name & Designation: _____
Mobile/Telephone No. and E-mail ID: _____

Fax No: _____
Office Seal: _____

Place:
Dated:

List of enclosure:

- 1.
- 2.
- 3.
- 4.
- 5.

(* Strike out which is not applicable)