# **Application for Consultant in ATM Discipline for** (Please Specify Location)

		Recent self- attested Photograph
Name	:	
Date of Birth	:	
Date of Retirement	:	
Designated Post on Retirement	:	
Address for Correspondence	:	
<b>Contact No</b> . Landline Mobile	:	
	·	
Email ID	:	

S1 No.	Degree	Year		Stream/	University	Class /
		From	То	Subjects		Division (if any)

## (ix) Relevant Experience: (please enclose relevant documents)

(a) Year-wise tasks / highlights of similar nature carried out during relevant experience period with all details including employer, position held & pay-scale.

S1. No.	Organization	Post Held with Basic Pay	Year		Total	Responsibilities	
			From	То	period of Experience	Handled	

(b) Vigilance / Disciplinary Clearance Certificate from previous employer and Last Pay certificate to be enclosed along with the application form.

Place:	Signature:
Date:	Name:

### Disclaimer:

The above information furnished by the applicant are true and correct. Any discrepancy reported at later date may lead to cessation of work agreement / contract.

## **Undertaking**

- I, hereby acknowledge that I have read all the clauses of notification and accept the same.
- I, hereby agree to consider my application as Consultant in ATM Discipline (Level E7/E6) if found suitable by the Selection Committee of AAI based on my eligibility.
- I, hereby submit my willingness to be engaged as Consultant in ATM Discipline (Level E7/E6) as decided by AAI if selected.

Name:			
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# **CONSENT FORM**

# (to be filled two months prior to separation)

I, Smt./Sh.			working as	
(Designation	n and Level) at		(Station/Place of Post	ing)
is superanr	nuating on	(Date).		
I do hereby	give my consent that I am	willing to wo	ork as Consultant with	AAI
after my s	uperannuation w.e.f		(Date from when	the
employee is	willing to take up consultan	acy with AAI).		
Signature	:			
Date	:			
Place	:			
T-				
To,				
RED / ED(A	ATM) at	(place)		