

11. Professional Qualifications:
(Attach copies in proof of qualifications)

12. Experience:
(Attach copies in proof of qualifications)

13. Other Qualifications:
.....
(Attach copies in proof of qualifications)

14. Have you ever been convicted of any offence in a court of law?
If "Yes" give details.

15. Certificate of Candidate:

I do certify that the information furnished above is accurate and true. I am aware that if any information furnished herein is found to be false or incorrect I will not be considered for selection or will be subject to dismissal.

Date :

.....

Signature of the Applicant

Certificate of the Head of the Department

(Only for applicants already in the government service)

The application of Mr./Mrs./Miss. who is working in this department is recommended and forwarded herewith. He/She could / could not be released from the present post held by him/her if selected for the above post.

.....

Head of the Department

Designation :

(Place the rubber stamp)

Address :

Date :

*Write-off unnecessary words.