## A-12023/2/2023-ESTABLISHMENT Government of India Ministry of Earth Sciences Prithvi Bhavan, Lodhi Road New Delhi-110 003

Annexure - I FORMAT OF APPLICATION

Affix passport size photograph

1.	i) Deputation ii) Direct Re iii) Both for	ts may please her for a specifi (including sho cruitment (on to deputation (included by Direct R				
2.	Name in full (	in block letters	)			
3.	Father's/Spou	the transfer of the standard of				
4.	(a) Date of Birth				Month	Year
	(b) Age as on closing date					
5.	Nationality					
6.	Religion					
7.	Category (SC/	ST/OBC/PH/G				
8.	Whether documentary proof from appropriate authority in support of your claim being SC/ST/OBC is enclosed (please tick)				es	No
9.	Address for code)	correspondence	1			
10.	Permanent add	dress (in block				
11.	Contact mobile number/e-mail id			mobile: e-mail:		
12.	Educational Q	ualification (in	)th standard	onwards)		
	S. No.	Courses Passed	University/Institution/ Board	Year of Passing	Subjects taken	Result with Division/Class
13.	Professional T	raining				
est.	Organiz	Deta		tails of Training		
	See See Manager		Period From	To	2.4	

14.	Employment records (in o	chronological orde	r starting with t	he first job)	
	Name and address of employer/institution	Period		Designation of post held and scale of pay	Nature of work and level of responsibilities
		From	То		
15.	Details of Last Employme	ent Held	_		
	Details of Last Employment Held  (i) Permanent/Temporary/Ad-hoc  (ii) Scale of Pay and Basic Pay  (iii) Other allowances  (iv) Total Salary (ii+iii)  (v) Whether your organization is a Central Government organization or State Government organization or Central Autonomous Institution or Central Government Undertaking or State Government Undertaking or State Government Undertaking or Statutory Body or University or any other – please specify  In case this employment is held on deputation/contract basis, please state,  a. the date of initial appointment.  b. period of appointment on deputation/contract  c. name of the parent office/ organization/		ate ral ral ate dy on		
16.	Details of research work/e	experience, if any			
17.	Specialization with reference to experience desired for the post				
18.	Remarks - any other information you may wish to add (list of publications, membership of learned societies, awards and recognition, etc.)				
19.	Details of Enclosures				

## 20. Declaration

I certify that the above information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. If at any time I am found to have concealed/distorted any material/information, my appointment shall be liable to be summarily terminated without notice/compensation.

Place:	
Times.	(Name and Clanature of Candidate)
Date:	(Name and Signature of Candidate)

## Certificate To Be Given By The Head Of Organization/Office

Certified that the above particulars have been verified and found to be correct. It is also certified that no disciplinary/vigilance proceedings are either pending or contemplated against the officer. He/she has not been awarded any major/minor penalty during the last 10 years. His/Her up-to-date CR Dossier (including ACRs/APARs for the last 5 years) is enclosed. Integrity of the officer is also certified.

Place:	
	(Name and Signature of the Head of the
	Organization/Office with Official Seal)
Date:	