## **APPLICATION FORM FOR DEPUTATION**

Affix Passport Size Photograph

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Post applied for	
1. Name and Address in Block letters	
2. Date of Birth (in Christian era)	
3. Date of retirement under Central /State Government rules	

4. Educational Qualifications

Sl. No.	Name of the Examination passed	Year of Passing	Name of the Board/University	% of Marks	Div.	Subjects taken

5. Whether Educational and other qualifications required for	
the post are satisfied. (If any qualification has been treated as	
equivalent to the one prescribed in the rules, state the authorit	ty
for the same)	

for the same)		
	Qualifications/experience required	Qualification/Experience possessed by the officer
Essential	(1)	
	(2)	
	(3)	
Desired	(1)	
	(2)	
6.Please state clearly	whether in the light of entries made by	

you above, you meet the requirement of the post.

7. Details of Employment, in chronological order. Enclose a separate sheet, duly authenticated by your signature, If the space below is insufficient

Office/ Instt./Orgn.	Post held	From	То	Scale o Pay H Grade	Band and	Nature of duties (in detail)	
8. Nature of presen or quasi-perman			e or temporary				
9. In case the prese contract basis, p	lease state-		deputation /				
(a) The date of i							
(b) Period of app	-	-					
(c) Name of the	parent office	<sup>7</sup> organisation	n to which				
you belong.							
10. Additional det		sent employ	ment please sta	te			
whether working	-						
(a) Central Go							
(b) State Gove							
(c) Autonomo	us Organisatio	ons					
(d) Governmen		gs					
(e) Universitie	S						
(f) Others							
11. Please state where the sta	hether you are	working in	the same				
department and are in the feeder grade or feeder							
to feeder grade	2.						
12. Are you in Rev	vised Scale of	Pay? If yes	, give the date	from			
which the revis	ion took plac	e and also in	dicate the				
pre-revised sca	le.						
13. Total emolume	ents per mont	h now drawn	1.				
14. Additional info	ormation, if a	ny, which yo	ou would				
like to mention in support of your suitability for							
			provide informa	ation			
with regard to	-		-				
(i) Additional	academic qua	lification					
(ii) Profession	-						
	-	and above pro	escribed in the				
	ircular/ Adver						
(Note : Enclos			bace is				
	1	~1					

insufficient.)

15. Please state whether you are applying for deputation	
16. Whether belongs to SC/ST	
17. Remarks : The candidates may indicate information	
with regard to	
(i) Research publications and reports and special projects	
(ii) Awards/ Scholarships/ Official Appreciation	
(iii) Affiliation with the professional bodies/ institutions/	
societies and	
(iv) any other information.	
(NOTE : Enclose a separate sheet if the space is insufficient).	

Declaration : I have carefully gone through the vacancy circular/ advertisement and I am well aware that the Curriculum Vitae duly supported by documents submitted by me will also be assessed by the Selection Committee at the time of selection for the post.

Signature of the candidate

Addres	ess with seal	 

## CERTIFICATE TO BE FURNISHED BY THE H.O.O.

- 1. Service particulars given above have been verified from the service record of the applicant and found correct.
- 2. Certified that no Vigilance enquiry is pending or contemplated against the applicant.
- 3. He/She will be relieved of his/her duties to take up assignment in the Central Pollution Control Board on his/her selection on deputation.

Place :....

Date .....

Date :....

Countersigned...... (Employer with seal)