

PROFORMA FOR APPLICATION

Application for the post of Receptionist/Front Office Counselor NIELIT, Chandigarh Centre

PART-I

**Affix one
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Passport Size
Photograph**

1. Name in Full : _____
 2. Father's name : _____
 3. Sex - Male/Female : _____
 4. Nationality : _____
 5. Date of Birth (Copy of 10th certificate as proof of age shall be enclosed) : _____
 6. Age as on 20th Dec., 2011 :Y.....M.....D
 7. Marital Status : _____
 8. Whether belongs to SC/ST/OBC/PH/GEN : _____
(Proof shall be enclosed in case of SC/ST/OBC/PH)
 9. Whether presently working in Govt. / Semi-Govt / Public Sector Undertaking/ Autonomous/Corporate Bodies (If yes, the application shall be sent through proper channel) : _____
 10. Permanent Address : _____

 11. Address for correspondence with : _____

- Telephone Nos. **Office** : _____ **Residence** : _____
- E-Mail ID** : _____

12. Academic & Professional Qualifications :

Name of the Instt./Board/University	Year of Passing	Exam/Degree	Marks obtained & aggregate marks	% of marks & Division

13. Employment History in chronological order :

SNo.	Name of Employer	Designation	Period		Salary Drawn	Nature of Duties Performed
			From	To		

14. Details of present employment
- i) Designation : _____
 - ii) Date from which held : _____
 - iii) Scale of the pay : _____
 - iv) Whether present post is held on regular/tenure/ Deputation or adhoc basis and since when : _____
 - v) If on deputation, details of post held on regular basis/ scale of pay and since when : _____
 - vi) Name of the organization with full address indicating name and designation of the contact person and Telephone / Fax numbers : _____

 - vii) Category of the Organization
 - a) Government / State Government : _____
 - b) PSU / Autonomous Bodies : _____
 - c) Private : _____
15. Details of Demand Draft in favor of Director National Institute of Electronics and Information Technology (NIELIT), Chandigarh Centre payable at Chandigarh : DD No. : _____ Date : _____
 Amount : _____ Bank: _____
16. Any other information : _____

Declaration

I hereby solemnly declare that all the above statements are true and correct to the best of my knowledge and belief.

Place : _____ Signature _____

Date : _____ Name of the applicant _____

PART-II

(To be filled in by the Competent Authority in the case of candidates who are presently working in Government / PSUs/ Autonomous Organizations only)

Certified that :-

- i) The information given above by the officer is correct.
- ii) No vigilance/disciplinary proceedings are either pending or contemplated against the above mentioned officer.

Signature : _____

Name : _____

Designation : _____

Department/
Organization : _____

Date : _____