

APPLICATION FORM FOR THE POST OF DIRECTOR.....IN PSPCL

(Through Proper Channel, except candidates from the Private sector)

1. Name of the post applied for:
2. (a) Applicant's Name (as per official records Mr./Mrs./Ms.):
 (b) Designation of the Applicant (in full):
 (c) Name of the Company:
 (d) Category as per Employment Status: Officer of a CPSE/Central
Government/Armed Forces of the Union/All
India Services/SPSE/Private Sector
 (Please Tick as applicable)
 (e) Office Address:
 (f) Address for communication:
3. Telephone No. Office:_____ Residence _____ Mobile No._____
 E-Mail ID:_____.
4. Date of Birth (DD/MM/YY):
5. (i) Educational/Professional Qualification:

Sr. No.	Qualification*	Name of Institution	Period of Study	Tick the relevant			Self-Declaration Whether meets the eligibility qualification requirement		
				Full Time	Correspondence	Degree	Mandatory	Desirable	Other

*Should be exactly as per Degree/Certificate issued by the University.

	(ii)	Postings held during the last 25 years:	
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Sr. No.	Complete Designation & Place of posting*	Name of the Organization	Pay Scale**	Period	Reporting to Designation	Does it meet the mandatory experience requirement, with reason

*Should be exactly as per specific office order issued by the CPSE/Ministry/SPSE/Employer

**Private Sector-CTC/remuneration/emoluments drawn

NB: the positions should be indicated in order of the most recent assignments.

6.	(a)	Do you hold lien in any organization other where currently working if Yes: i) Name of the Organization in which the lien is held: ii) Date from which the lien is held:	<table border="1" style="margin: auto;"> <tr> <td style="padding: 2px 10px;">Yes</td> <td style="padding: 2px 10px;">No</td> </tr> </table>	Yes	No
Yes	No				
	(b)	Are you on deputation? If Yes: i) Name of parent Organization: ii) Date from which on deputation:	<table border="1" style="margin: auto;"> <tr> <td style="padding: 2px 10px;">Yes</td> <td style="padding: 2px 10px;">No</td> </tr> </table>	Yes	No
Yes	No				
7.	(a)	Whether any penalty/punishment was awarded to the applicant during his/her service: If yes, the details thereof: i) Civil/Criminal ii) Departmental Inquiry	<table border="1" style="margin: auto;"> <tr> <td style="padding: 2px 10px;">Yes</td> <td style="padding: 2px 10px;">No</td> </tr> </table>	Yes	No
Yes	No				
	(b)	Whether any Civil or Criminal action or inquiry is going on against the applicant as far as his/her knowledge goes. If yes, the details thereof: i) Civil/Criminal ii) Departmental Inquiry	<table border="1" style="margin: auto;"> <tr> <td style="padding: 2px 10px;">Yes</td> <td style="padding: 2px 10px;">No</td> </tr> </table>	Yes	No
Yes	No				

8. Gist of ACRs of last 10 years:

Year	Reporting Authority	Reviewing Authority	Accepting Authority

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge & belief.

(Name & Signature of the Applicant)