

9. Any other information (if any):
.....
.....

10. Detail of Enclosures:
.....
.....

11. Declaration:

I Mr./Mrs./Ms.. Certify that the forgoing 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 on deputation shall be liable to be summarily terminated without notice/ compensation.

Place:

Date:

(Signature of Candidate)

(FOR USE OF FORWARDING OFFICE)

It is certified that the details given by the applicant as above are correct as per the records.

(Signature of the forwarding Officer)

Name:

Designation:

Seal of the Office: