APPLICATION PROFORMA

Name of the Post Applied for : Deputy Director, CFTI, Agra

Name of the Applicant :

E-mail address : Passport size photograph to be pasted

Contact No. :

Father's Name :

Correspondence Address :

Permanent Address

Date of Birth : --/--- Age

Category (Gen/SC/ST/OBC) : Gen/SC/ST/OBC

(Certificate to be enclosed in case of SC/ST/OBC)

Educational Qualification:

(Copies to be attached)

a. Essential

S. No.	Name of Exam Passed	Board/ University	Year of Passing	Subjects	% / Division
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2.					
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b. Desirable

S. No.	Name of Exam Passed	Board/ University	Year of Passing	Subjects	% / Division
1.					
2.	6				
3.		8			
4.					

Experience: (Copies of Experience Certificate to be attached)

S. No.	Post Held	Duration	Salary Drawn	Name of Organisation	Nature of Work
				N .	

DECLARATION

I hereby declare that above information is true, correct and complete to the best of my knowledge and belief.

Encl:

Signature of Applicant

Note:

- 1. A brief self assessment (one page) regarding suitability for the post should also be enclosed by the applicants.
- 2. Applicants must also enclose self attested copies of certificates and date of birth with their application.
- 3. Incomplete application & without copies of certificates would be rejected.
- **4.** Candidates serving in Central / State Govt. or any Govt. undertaking/autonomous organizations are required to send their application through proper channel. However, they may send an advance copy to O/o DC (MSME) and produce NOC at the time of interview.
- **5.** Giving false information and canvassing in any manner will render the applicant ineligible for the post.