APPLICATION FOR ENGAGEMENT OF CONSULTANT

1.	Full Nar	ne :			• • • • • • • • •			
2.	2. Designation (at the time of superannuation):							
3.	3. Name of Organization last worked in:							
4.	Date of B	irth:						
5. Present postal address:								
6.	Permaner	nt address:						
7.	Mobile N	o:						
8. Alternative Mobile/Landline No:								
9.	E-mail ad	dress:						
10	. EDUCA	TIONAL QUA	ALIFICATIO)N*				
	Specialized Qualification, if any.		University,	/Institute	Disci	pline	Remarks	
* Please enclose self-attested copy 11. DETAILS OF PREVIOUS PROFESSIONAL EXPERIENCE								
	Sl No	Positions held/designa	ation	Nature of we experience	ork/	Approx. duration (yrs)	Remarks	

13. Retirement reference (Please enclose self-attested copy of PPO)/Service Certificate/last salary slip						
14. Whether any departmental or criminal proceedings are pending against or have ever resulted in imposition of penalty on the applicant.						
If yes, details thereof:						
<u>UNDERTAKING</u>						
I solemnly declare that information given above is correct and complete. For any information found incorrect at any stage, I shall be liable for termination of my aforesaid engagement as Inquiry Officer.						
Name & Signature of the applicant Date:						
Place:						