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5.0 Educational Qualifications :

5.1	Degree	Institute	Date
.....
.....

6.0 The date of taking oaths as an Attorney-At-Law of the Supreme Court :.....

6.1 Date of Completing 03 years' experience after taking oaths as an Attorney-At-Law of the Supreme Court.

6.2 Date of completing 03 years of experience in a legal position in a government institution :.....

- **Certificates / Documents proving the basic qualifications should be self-certified and submitted along with the application.**

7.0 Details of obtaining each of the qualifications under No. 06 of the notice calling applications :

7.1 Additional Educational Qualifications :.....
.....

7.2 Additional Professional Qualifications :
.....

7.3 Knowledge of Information Technology :
.....

7.4 Language Proficiency :
.....

- Documents in proof of additional qualifications should not be sent along with the application, and it is the responsibility of the candidate to have these documents ready to be submitted at the interview.

8.0 Have you ever been convicted before a Court of Law ?
.....
.....

9.0 Declaration of the Applicant

I hereby declare that all the above information mentioned by me is true and accurate, and all the parts here have been completed correctly, and that I am well aware that if this statement made by me is found to be false, I shall be disqualified before being appointed to the post, subject to dismissal after being appointed to the post and disciplinary action taken against me, and that I am subject to all the rules and regulations.

Date

.....

Signature of the Applicant

10.0 Attestation of the Signature of the Applicant

I hereby certify that Mr./ Miss./ Mrswho is forwarding this application, is known to me in person, and he /she placed his / her signature in my presence.

.....

Signature of the officer attesting the signature

Full Name :

Post :

Date :

(Confirm by the official Stamp)

11.0 Recommendation of the Head of the Department

I hereby certify that Mr. / Mrs. /Miss whose details are mentioned above is serving in this institution, that the information provided by him / her is correct, that his / her work and attendance are satisfactory, that there are no charges against him / her, and that he / she can be released from the service of this institution if selected for this post.

.....

Signature of the Head of the Department

Name :

Name of the Position :

Address :

Date :

(Confirm by the Official Stamp)