

4.0 Educational Qualifications

4.1.1. Degree

- (i) Effective date of the degree :
- (ii) University / Institution :
- (iii) Degree :

4.1.2. Postgraduate Degree

- (i) Effective date of the degree :
- (ii) University / Institution :
- (iii) Degree :

4.2. Experience relevant to the post :
.....

4.3 Additional educational / professional qualifications

- (i) Institution :
- (ii) Qualification :
- (iii) Effective date of the qualification :

05. Have you ever been convicted by a court for any offence?

(Place a tick (✓) in the relevant box) (If yes, please provide details)

No		Yes	
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06. Applicant's Declaration:

I hereby declare that the information provided by me in this application is true and correct and that all sections have been completed accurately. I am aware that if this declaration is proved to be false, I will be disqualified prior to appointment, and if appointed, will be liable to dismissal from service. I further declare that I'm subject to all applicable laws and regulations.

.....
Date

.....
Signature of the Applicant

07. Certification of the Applicant's Signature:

The applicant's signature shall be certified by a Principal of a Government School / a Justice of the Peace / a Commissioner for Oaths / an Attorney-at-Law / a Notary Public / a commissioned officer of the Tri-Forces, or by a public officer holding a permanent post and drawing a basic monthly salary exceeding Rs. 72,280/-.

I hereby certify that Mr./Mrs./Miss, who submits this application, is personally known to me, and that he/she placed his/her signature in my presence at.....on

..... Date Signature of the Certifying Officer
Full Name	:
Designation	:
Date	:

(Official seal to be affixed)

08. Certification by the Head of the Department (if the applicant is in the Public Service):

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

.....
Signature of the Head of the Department / Institution

Name :
Designation :
Address :
Date :

(Official seal to be affixed)