APPLICATION FORM

Post Applying: Assistant Director/ Legal.

1. Employee Details

1.1 Name: ……

1.2 EPF Number: ……..

1.3 Division: ……

1.4 Designation: ..……

1.5 Email Address: ……

2. Educational Qualifications

2.1 Bachelor's Degree

Degree	University/ Institute	Valid Date	Copy of the certificate to be attached
			Annexure (…)
			Annexure (…)

2.2 Master's Degree

Master's Degree	University/ Institute	Valid Date	Copy of the certificate to be attached
			Annexure (…)
			Annexure (…)

2.3 Diploma/ Higher Diploma/ Post Graduate Diploma

Higher Diploma/ Diploma/ Post Graduate Diploma	University/ Institute	Duration			Copy of the certificate to be attached
		From	To	No. of months/ Years	
					Annexure (…)
					Annexure (…)
					Annexure (…)
					Annexure (…)

2.4 Certificate Courses

Certificate Course	Institute	Duration			Copy of the certificate to be attached
		From	To	No. of months/ Years	
					Annexure (…)
					Annexure (…)
					Annexure (…)

					Annexure (…)

3. Professional Qualifications:

Membership obtained	Institute	Valid Date	Copy of the certificate to be attached
			Annexure (…)
			Annexure (…)
			Annexure (…)
			Annexure (…)
			Annexure (…)

4. Work Experience:

4.1 Work experience prior to SLTDA

Years & Months		Position	Organization	Copy of the certificate to be attached
From	To			
				Annexure (…)
				Annexure (…)
				Annexure (…)
				Annexure (…)
				Annexure (…)
				Annexure (…)

4.2 Work experience at SLTDA

Duration			Division	Position	Category	Grade
From	To	No. of years & months				

5. Other Skills and Performances:

	Area of acquired skills/ Performances/ Extra Curricular Activities	**Copy of the proof documents to be attached**
		Annexure (…)
		Annexure (…)
		Annexure (…)
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		Annexure (…)

I do hereby certify that the above particulars furnished by me are true and correct to the best of my knowledge and forward the same for your kind consideration.

…… ……

Signature of employee **Date**

…… ……

Head of the Department **Date**