

Pusa, Samastipur, Bihar -848125

APPLICATION FORM FOR THE POST OF FIRST COMPTROLLER

	(For office use only)									
Elig	ible:				(Ye	es / No)			Paste	e your recent
If nc	F not Eligible, reason thereof:									
	ails of Fee Paym C, ST and Women ca			000/	/- only	for General, O	BC and	EWS category ca	indidates Paymer	nt of ₹ 500/- only
	que Transaction Reference No.	Date	e of transacti	ion		Amount		Name of th	ie Bank used f	or payment
1	Name]	First	Name	е	Mi	ddle Name	Sur	name
	(In Capital Lette	rs)								
2	Date of birth		Day	M	onth	Year	A a a	e on last data	Years	Months
								s on last date vertisement		
3	Place of birth		City/Village				State Country			
4	Mother's Name									
5	Father's Name									
6	Address			Cor	respo	ndence			Permanent	
			City:					City:		
			District:					District:		
			State:					State:		
			Pin Code:					Pin Code:		
Mobile: Mobile:										
7	Nationality		Email:					Email:		
			Mala / D	.1/m						
8	Sex		Male/ Fema	ue/T	ransg	ender:				

9	Community/ Category (Please strike out whichever options are not applicable)	UR/OBC/SC/ST/EWS: Sl. No. of proof enclosed (if belongs to Reserved Category):
10	Marital status	Married/Unmarried/Divorced: If married, name of spouse

11. Educational Qualifications (Attach additional pages, if required)										
	Name of course	B	ne of the bard/ versity	Year passed	Division	CGPA (if grading is applicable)	% of Marl (pl. indicat equivaler to CGPA also)	es t Su	bjects studied	Sl. No. of proof of enclosure
	(a)		(b)	(c)	(d)	(e)	Ø		(g)	(h)
10th Class / equivalent										
10+2/Higher Secondary/ equivalent										
Bachelor's degree										
Master's degree	2									
			Name of Co	R	Roll No.			Sl. No. of Proof of enclosure		
Any other e	xams passed									
12. Chrono	logical list of	Expe	rience (sta	arting fror	n current j	position/ em	ployment)			
				Period	of Experie	ence				
Designation	Name & addre employer		From		То	Pay level as 7 th CPC ar Basic pay drawn	nd		re of work/ duties	Sl. No. of proof of enclosure
(a)	<i>(b)</i>		(c)		(d)	(e)			(f)	(g)

* (Add separate sheet if required, to be annexed at relevant S. No.)

13. Nature of Experience						
	No. of Years	No. of Months	No. of Days	Sl. No. of proof of enclosure		
a) Teaching						
b) Administrative						
c) Research						
d) Other experience, if any						
Total Experience						

* (Add separate sheet if required, to be annexed at relevant S.No.)

14. Details of the training programme attended					
Name of the Programme	Year	Duration (in days)	Organizing Institution		

15. Details of the Management Development Programmes attended					
Name of the ProgrammeYearDuration (in days)Organizing Institution					

14. Details of the orientation programmes/training programmes/workshops					
Name of the ProgrammeYearDuration (in days)Organizing Institution					

14. Details of the refresher programmes attended					
Name of the Programme	Year	Duration (in days)	Organizing Institution		

14. Please provide details of two (02) referees (Not related to the candidate). At least one should be current superior.					
Name of the referee	Designation	Address	Contact No.	Email ID	

- 15. Have you ever been punished during your studies at College/University? (Yes/No) :
- 16. Have you ever been punished during your service or convicted by a court of law? (Yes/No) :
- 17. Were you at any time declared medically unfit or asked to submit your resignation or discharged or dismissed? (Yes/No) :
- 18. Do you have any case pending against you in any court of law? (Yes/No) :
- **19.** Any other information/qualification relevant to the post applied for:

*Application not signed by the candidate is liable to be rejected

21. Endorsement by the EMPLOYER	(for In-Service Applicants)
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Certificate of Verification by the Employer

- 2. There is no vigilance/disciplinary/criminal case pending against him/her.
- 3. Whether any Minor/Major penalties under CCS (CCA) rules, 1965 have been imposed during the last ten years on him / her Yes / No.

If Yes give details.....

- 4. Certified that the work and conduct of Dr./Shri/Smt./Km. is above average during the last five years.
- 5. The gist of AAR/ACR gradings/ratings for the preceding five years is as follows:-

Year →			
Grading/Rating by Reporting Officer →			
Grading/Rating by Reviewing Officer →			

Office File/ Ref. No.

Signature:

Name:

Designation with office seal

Office Seal

Date:

In service candidate should get the above endorsement signed by his/her present forwarding authority.

Please tick the enclosures attached:

SI.	Check List	Sl. No. of enclosure	No. of Sheets
1.	Proof for Date of Birth		
2.	Matric/Secondary/High School (10 th Class) Marks Sheet		
3.	Matric/Secondary/High School (10 th Class) Certificate		
4.	Sr. Secondary/Intermediate (12 th Class) Marks Sheet		
5.	Sr. Secondary/Intermediate (12 th Class) School Certificate		
6.	Bachelor's Degree Final Year Marks Sheet		
7.	Bachelors' Degree		
8.	Master's Degree Final Year Marks Sheet		
9.	Master's Degree		
10.	Any other Qualification		
11.	Caste Certificate issued by the Competent Authority		
12.	Experience Certificate(s) from previous employer(s)		
13.	Endorsement from the present employer		
14.	Payment receipt for the application fees		
15.	Any other		

Total number of sheets enclosed______ (please give sequential number to each sheet and signature with date).