

PROFORMA FOR APPLICATION OF STENOGRAPHER GRADE-II

1. Advertisement No:
2. Category Applied for:
(Please specify whether General/OBC/PWD)
3. Option for medium of skill test (Stenography)
(Applicable only for OH category candidates)
4. IPO/Bank Draft No. with date & amount:
5. Name (in block letters):
Last Name:
Middle Name:
First Name:
6. Father's /Husband's Name:
7. Category:
(if reserved, please attach certificate)
8. Whether disabled, if yes,
(please specify the nature of disability,
Certificate issued by Competent Authority may be attached)
9. Permanent Address
10. Address for correspondence

Pincode :
Tel. No. & Fax No. with STD Code:
E- mail :
Mobile :
11. Nearest Railway Station:

Space for
photograph duly
signed by the
candidate

12. Date of Birth (Date/Month/Year)
(please attach certificate)

13. Age as on 30.11.2014.
(in Years, Months and Days)

14. Scale of Pay of present post & present
Basic Pay and total emoluments drawn:
(for already employed candidates)

15. Educational Qualifications starting with Higher Secondary (10+2) :

Exams passed	Name of the Board/ University	Year of passing	Subjects	Division	Percentage of marks obtained	Enclosed annexure No.

16. Employment details (Chronologically from present position backwards)

Name of the Employer/ Organization	Full Address of Employer/Organization	Post held (with pay scale)	Period From* - To*	Nature of duties/ experience

* Specify Month and Year

17. References: (Name and Designation along with contact address details including fax, email and mobile)

- (i)
- (ii)
- (iii)

18. Any other relevant information:

DECLARATION

I affirm that information given in this application is true and correct. I also fully understand that if at any stage it is found that any attempt has been made by me to willfully conceal or misrepresent the facts, my candidature may summarily be rejected and employment terminated.

PLACE : (SIGNATURE OF THE APPLICANT)

DATE :

CERTIFICATE TO BE FURNISHED BY THE EMPLOYER/FORWARDING AUTHORITY

Certified that :

- (i) the particulars furnished by Dr./Shri./Smt/Kum. _____ are correct.
- (ii) there is no vigilance/disciplinary case either pending or contemplated against him/her.
- (iii) Integrity of the applicant is certified.
- (iv) The applicant would be relieved to join the Wildlife Institute of India in the event of his/her selection with a 3 month period.

Date : Signature of Head of Department/Forwarding Authority

Name :

Department :

Office :

Tel. No. :

Fax No. :

Mobile :

E-mail :