

ANNEXURE (APPLICATION)

**APPLICATION FOR THE POST OFON DEPUTATION BASIS TO WORK IN
ANNAPRASADAM TRUST, TIRUMALA**

Affix Recent
Photograph

1		Name in Full (in block Letters)			
2		Father Name			
3		Mother Name			
4		Date of Birth			
5		Age	Years:		Months:
6		Gender			
7		Marital Status			
8		Nationality			
9		Religion	HINDU		
10		Name of the present post holding			
11	a	Address for Correspondence (in block letters) - Employer Address			
	b	Pin Code			
	c	Telephone/Mobile No			
	d	E-mail Id			
12		Languages Known			

Educational Qualifications (in chronological orders from SSC onwards)

13	Sl. No	Examination	Board/ University	Year of passing	Division/ Class	Subjects/ Courses

Employment Record (details in reverse in chronological order, starting with the last job)

14	Sl. No	Designation	Name of the Organization	**Type of the Organization	Scale of Pay	Nature of appointment	Period of service			Nature of work and level of Responsibilities
							From	To	period	

**** Central Government /State Government/ Government aided institute /Government aided University/ State Government autonomous Institute or Central Government / State Government Autonomous body or Any other (Please clearly specify)**

15	If pay scale has been revised recently, state the date of revision and also the pre-revised pay scale			
	Sl.No		Pre-Revised	Present
	1	Basic Pay		
	2	Dearness Allowance		
	3	Other Allowances		
	4	Total Gross		
* Attach a copy of the Last pay slip in support of the above				
16	Self-Appraisal not more than 50 words			
17	Any other information (in brief and no annexure be enclosed)			

DECLARATION

I certify that the foregoing information is correct and complete to the best of my knowledge and belief and nothing has been concealed/distorted. At any time I am found to have concealed/distorted any material information, my deputation shall be liable to be summarily terminated without notice/compensation.

Signature of Candidate

Date:

Place :

COMPETENT AUTHORITY /EMPLOYERS ENDORSEMENT

This is to certify that Dr/Sh/Smt. is working as..... from..... on **regular basis** inour department / institute/organization. The above details given by him /her are verified and found correct as per our records. It is further certified that no vigilance / disciplinary case and departmental enquiry is either pending or contemplated against him /her. The integrity of the officer is also certified. In case of his/her selection, he/ she will be relieved on **deputation basis** as per conditions of the Annaprasadam Trust, Tirumala and his/ her lien will /will not be retained by this organization.

Signature of employer with Office Stamp

Date:

Place: