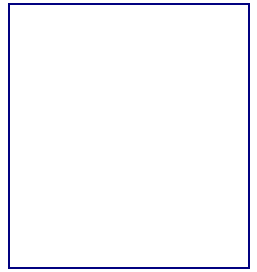


Application Form



Post Applied for : _____
Name : _____
Male/Female : _____
Date of Birth : _____ Age _____ Domicile State _____
Marital Status : _____

Permanent Address:	Mailing Address:
Telephone/Email : _____	Telephone/Email : _____

Educational Qualification (Graduation onwards)

Qualification	Specialization	Year (From-To)	Division/ Grade	University/Institution
Graduation				
Post-graduation				
Any other				

- Whether you were/ or associated with/member of/ any social/development organization? If yes? Specify:

- Expertise on subject (eg. Socio-economic, Community Development, Accountancy etc.) – Project Management.

- Competent Skills :

Details of your Experience, in reverse chronological order starting with the present or most recent one.

(a)

Employer/ Organization:

Your Functional Title :

Work Location:

Period of work from :

Reason for leaving :

Description of Major Activities	

(b)

Employer/ Organization :

Your Functional Title :

Work Location :

Period of work from :

Reason for leaving :

Description of Major Activities	

(c)

Employer/ Organization :

Your Functional Title :

Work Location :

Period of work from :

Reason for leaving :

Description of Major Activities	

(d)

Employer/ Organization :

Your Functional Title :

Work Location :

Period of work from :

Reason for leaving :

Description of Major Activities	

Language Known:

(Rank them order Excellent : 1-Fluent, 2-Fluent, 3-Working Knowledge, 4-Basic)

	Read	Write	Speak	Understand
English				
Telugu				
Hindi				
Other				

- Do you think your success in this project?
- Specify your strength.
- Have you ever suffered from any serious illness, including nervous/ disorders?
- Do you have any disability, which would limit you, mobility?
- Write a note on your views on tribal development [350 words in separate sheet]
- Please specify any relevant details not covered in the above questions, which you would like to inform us.

References : List of three persons

Sl. No	Full Name	Full Address	Telephone/ Email ID	Profession

I certify that the statements made in answer to all the above questions are true, and correct to the best of my knowledge. I understand that any misrepresentation or omission in this application form may render my candidature invalid or liable for early termination of my contract.

Place :

Date :

Signature