

**Affix latest
self attested
passport size
coloured
Photograph**

APPLICATION FORM FOR THE POST OF ACCOUNTANT

Post applied for: _____

Draft Amount Rs. _____/- (Rs. in words _____)

Demand Draft No: _____ Dated: _____

1. Name:
(In Capital Letter)

2. Mother's Name:

3. Father's name:

4. Gender:

Male		Female		Others	
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5. Date of Birth & Age: DOB: _____

AGE (On Last date of submitting application): _____YEARS _____MONTHS _____DAYS

6. Marital Status: _____ 7. Nationality_____

8. Address for correspondence

9. Permanent Address:

City / District:

																				PIN:																	
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State:

10. Contact Details:

Telephone No: _____ Mobile No.: _____
 Email-ID: _____

11. Academic Qualifications:

Examination Passed	Subjects	Name of the University/ Institute	Mode of Study (Regular/ Private/ Distance Learning)	Mark Details			Course Duration & Year of Passing
				Marks Obtained	Total Marks	% of marks/ CGPA obtained	
Matriculation							
Intermediate / 12 th							
Graduation							
Post-Graduation							
Other Courses							

12. Language:

Speak		Read		Write	
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13. Distinctions/ Prizes/ Awards/ Medals/ Honours, etc:

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14. Professional Experience (Pl. start with current exp.): Only post qualification experience should be mentioned.

Name of the Organisation /Institution	Type of Institutions: Central Govt./ State Govt./ Autonomous/ PSU/ Private	Designation & Nature of Engagement (Permanent/ Temporary/ Contract)	Duration		Pay Scale	Total Monthly Pay	Nature of Duties performed	Reasons for Leaving
			From	To				

15 Any other information that you consider relevant to support your application (In 150 words)

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16 List of Enclosures to be scanned and emailed along with Application Form.

- 1. Application Form with Photograph
- 2. Date of Birth certificate
All Educational certificates and Mark sheets from Matriculation onwards till the Highest Qualification obtained.
- 3. All the Experience certificates (Present and Previous)
- 4. Bank draft
- 5. Any Other certificate/Testimonial

17 **CANDIDATES UNDERTAKING**

I _____ Son/daughter/wife of _____ resident of _____ hereby solemnly declare that the information made in this application as above is correct and complete to the best of my knowledge and belief, and that no information has been concealed or suppressed and if there has been suppression of any factual information, my services can be terminated any time during my services, if selected. I also undertake to observe all the instruction to the candidates.

Place:
Date

Signature of the Applicant