



10 Details of affiliation with Professional Bodies / Institution / Society:

Name of the Body	Membership No	Since When

11 Experience:

Details of posts held from time to time: As on **25th September 2015:**

(If required please attach separate sheet)

Sr. No	Name of the Organization with No. of employees & Annual Turnover	Position Held	Scale of Pay & Gross Emoluments	Period		Total Experience		Nature of Job (Responsibilities handled) *
				From	To	Year	Month	

12 List of Publications/academic honors received:


13 Proven achievements


14 Any other information


I declare that all the above information and particulars are correct and that I will stand disqualified if any information is found to be incorrect at any stage.

I undertake to abide by all the conditions and General conditions mentioned in the advertisement given by the Company.

Place:

Date:

Signature

Note: Copies of Testimonials in support of age, qualifications, experience etc. may be furnished, wherever necessary.

\*\* \*\* \* \*\* \* \*\* \* \*\* \* \*\* \* \*\* \*