



15. Professional Experience:

S. No.	Period	Post Held & Scale of Pay	Name of the Employer	Reason for leaving

16. Employment Exchange Registration details, (if available): No: \_\_\_\_\_ Exchange: \_\_\_\_\_

17. If selected what period would you require joining the post: \_\_\_\_\_

18. Have you ever been declared unfit by a medical board/court for appointment in any Govt. Service? (Yes/No), if Yes, give details \_\_\_\_\_

I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief and I agree to the terms and conditions of appointment given in advertisement.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of the Candidate