



(MINISTRY OF COMMERCE & INDUSTRY, GOVT. OF INDIA)  
A-10/A, Sector-24, NOIDA

APPLICATION FORM FOR ENGAGEMENT OF CONSULTANTS / ADVISORS

Ref. No: \_\_\_\_\_

Name: \_\_\_\_\_

Post Applied For: \_\_\_\_\_

Gender : \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age as on last date of application (09.07.2021): \_\_\_\_\_ (yy) \_\_\_\_\_ (mm) \_\_\_\_\_ (dd)

Affix latest  
passport size  
photograph

| EDUCATIONAL / PROFESSIONAL QUALIFICATIONS<br>(Attach self-attested copies of Certificates/Mark sheets) |           |                   |                 |        |
|--------------------------------------------------------------------------------------------------------|-----------|-------------------|-----------------|--------|
| QUALIFICATION                                                                                          | INSTITUTE | BOARD/ UNIVERSITY | YEAR OF PASSING | MARKS% |
|                                                                                                        |           |                   |                 |        |
|                                                                                                        |           |                   |                 |        |
|                                                                                                        |           |                   |                 |        |
|                                                                                                        |           |                   |                 |        |

WORK EXPERIENCE (In descending order) - add extra sheets if required

|                          |  |  |  |    |  |  |  |
|--------------------------|--|--|--|----|--|--|--|
| Name of the Organization |  |  |  |    |  |  |  |
| Designation Held         |  |  |  |    |  |  |  |
| Period                   |  |  |  | TO |  |  |  |

|                     |  |
|---------------------|--|
| <b>Work Details</b> |  |
|---------------------|--|

|                                |
|--------------------------------|
| <b>PREVIOUS JOB EXPERIENCE</b> |
|--------------------------------|

| ORGANIZATION<br>NAME | DESIGNATION<br>HELD | WORK DETAILS | PERIOD |    |
|----------------------|---------------------|--------------|--------|----|
|                      |                     |              | FROM   | TO |
|                      |                     |              |        |    |
|                      |                     |              |        |    |
|                      |                     |              |        |    |

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|                         |
|-------------------------|
| <b>PERSONAL DETAILS</b> |
|-------------------------|

|                              |  |
|------------------------------|--|
| <b>E-mail id</b>             |  |
| <b>Mobile No.</b>            |  |
| <b>Emergency Contact No.</b> |  |
| <b>Current Address:</b>      |  |
| <b>Permanent Address:</b>    |  |
| <b>Marital Status</b>        |  |

**Statement of Purpose:**

(Stating how the applicant proposes to contribute to the organization in about 200 words- Attach separate sheet)

**Declaration**

I certify that the above information is correct and true to the best of my knowledge and belief.

Yours faithfully,

**Place:**

**Date:**

**(Signature of the candidate)**