

**CENTRAL ENVIRONMENTAL AUTHORITY**

**Application form for the Post of .....**

01. Name in full (Mr./Mrs./Miss) -

.....

02. Name with Initials -

.....

03. Date of Birth -

Date      

|  |  |
|--|--|
|  |  |
|--|--|

 Month      

|  |  |
|--|--|
|  |  |
|--|--|

 Year      

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

04. National Identity Card Number

|  |  |  |  |  |  |  |  |  |  |  |  |  |
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|--|--|--|--|--|--|--|--|--|--|--|--|--|

05. Gender : Female-1 / Male-0

*(Indicate the relevant code in the cage)*

**06.** Permanent Address:

.....

07. Telephone Number  
(Mobile)

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
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|--|--|--|--|--|--|--|--|--|--|

Residence - .....

(Two telephone numbers should be mentioned)

E- mail Address - .....

08. Academic Qualifications –

Name of the Degree  
(As mentioned in the certificate)

Name of the University

Effective date

i. .... .....

..... .....

.....

ii. .... .....

..... .....

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iii. .... .....

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09. Professional Qualifications  
(As mentioned in the certificate)

Name of the Institute

Effective date

i. .... .....

..... .....

.....

ii. ....

.....

iii. ....

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10. Other relevant Qualifications – Name of the Institute Effective date  
(As mentioned in the certificate)

i. ....

.....

ii. ....

.....

iii. ....

.....

11. Relevant Experiences -

|         | Position | Institute | From |   |   | To |   |   | Total Period |   |   |
|---------|----------|-----------|------|---|---|----|---|---|--------------|---|---|
|         |          |           | D    | M | Y | D  | M | Y | D            | M | Y |
| Present |          |           |      |   |   |    |   |   |              |   |   |
| Past    |          |           |      |   |   |    |   |   |              |   |   |

12. Any other Special Achievements -

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13. Name, Position and Contact Information of two Non – Related References -

|  |  |
|--|--|
|  |  |
|--|--|

14. I hereby assure that all the above information furnished by me are true and correct to the best of my knowledge.

.....

Date

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Signature of Applicant