APPLICATION FORM

Photograph should be self-attested.

1. Vacancy Notice No. & Name of the Post applied for



2. Applying for Regular/Absorption/Deputation/Contract/Re-employment (Tick whichever is applicable)

3. Name of the Present Organisation

- 4. Present Designation:
- 5. Candidate's Name (in capital letters) (Please keep one box blank between name, middle name & surname)

6. Father's/Husband's name (in capital letters) (Please keep one box blank between name, middle name & surname)

7. Date of Birth	Day	Month	Year
Age as on cut-off date (as on 02.07.2025)	Years	Months	Days
			1

8. Date of Retirement	Day	Month	Year

9. Details of Educational Qualification possessed by the officer:

(A	ttach supp	orting Doc	uments)

Qualification	Specialization	Institute	Board/ University	Year of Passing	Percentage of marks (Max. 2 decimal)
10 th / SSC					
ITI/Inter/+2					

Details of Essential Qualification for the post applied

Qualification	Specialization	Institute	Board/ University	Year of Passing	Percentage of marks (Max. 2 decimal)
Diploma					
B.E/B. Tech					
Graduation					
Post-Graduation					

Details of Additional Qualification

Qualification	Specialization	Institute	Board/ University	Year of Passing	Percentage of marks (Max. 2 decimal)

9. b) Details of Qualification in Japanese Language Proficiency Test (JLPT):

Level of Proficiency	Month & Year of Passing	Score/Marks Obtained

10. Details of employment# in chronological order. Enclose a separate sheet duly authenticated by your signature, if the space below is insufficient.

Name and address of	Designation	Scale of Pay	f Pay		Total Experience	Clearly indicate the nature of experience. Also mention the	
employer			From	То	in years	name of the project/ unit where worked	

The employment should be supported by way of documentary evidence i.e work certificate from employer, appointment letter from organisations, pay slips etc.

10. a) Details of Experience as Trainer/Faculty.

Sl. No.	Name of the Institute	Subjects Handled	Period

11. APAR/ACR gradings for last 3 years (Please attach copies):

20 20	20 20	20 20

12. Nature of present employment i.e., Ad-hoc/Temporary/Contractual/Regular (Tick whichever is applicable)

- 13. Additional details about present employment:
- a) Central PSU/Joint Sector/SPV
- b) Metro Railway
- (c) Pvt Sector
- (d) Any other sector
- 14. Details of pay particulars (Copy of last Salary Slip duly self-attested to be attached):
 - a) Are you in CDA or IDA pay:
 - b) If in CDA, please indicate the Pay, Pay Band and Level:
 - c) The Pay, Pay band and level held under MACP, if applicable:
 - d) If in IDA, please indicate the pay scale:
 - e) Whether in pre revised or revised scale of Pay (CDA/IDA):

f) If in Pre-revised scale of pay in IDA then indicate the pre-revised scale and the

corresponding revised scale of pay in IDA:

15. Total emolument per month (Give break up & attach a copy of latest pay slip)



16. Additional information, if any, which you would like to mention in support of your suitability for the post. Amongst other things may provide information with regard to (i) Additional academic qualifications (ii) Professional training and (iii) Work experience with respect to job description of the post advertised) (The details should not be in more than 200 words. Enclose a separate sheet, if the space is insufficient)

17. Community	SC	ST	OBC	EWS	UR

18. Present Address (in capital letters)

(a) Name of the nearest Railway Station:

19. Permanent Address (in capital Letters)

20. Mobile No	1)	2)
21. Email id		

22. References (Of 2 Senior Officers with whom you have worked for a minimum of 2 years or more)

	Ι	II
Name		
Designation		
Organisation		
Mob		
email		

DECLARATION TO BE SIGNED BY THE CANDIDATE

I hereby certify and declare that (i) I have carefully gone through the vacancy circular/advertisement and I am well aware that the Curriculum Vitae duly supported by documents submitted by me will also be assessed by the selection Committee at the time of selection for the post, (ii) All statements made and information given by me in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect before or after the interview or appointment, criminal action can be initiated against me by NHSRCL and my candidature/appointment shall automatically stand terminated, (iii) I further declare that I fulfil all the conditions of eligibility prescribed for the post applied for. (iv) In case my application is not received by NHSRCL within the stipulated date due to postal delay or otherwise, NHSRCL will not be responsible for such delay.

23.	List of Enclosures: (i)	(ii)
	(iii)	(iv)
	(v)	(vi)

Place:

Date:

(Signature of the Applicant)

24. Declaration about DA/VIG/SPE/CBI/CRIMINAL CASEs

For Candidates applying on absorption basis/Deputation Basis*

I hereby certify that I do not have any Disciplinary case/Vigilance Case/Any case arising out of SPE/CBI pending against me. I do not have any Criminal Proceedings pending against me.

I further certify that I am not undergoing any punishment as on the date of this application.

(Signature of the Applicant)

*Candidates applying on deputation have to provide an additional DA/Vig/SPE clearance certificate from their employers

Countersigned

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(Employer with Seal) In cases of deputation