

7. **Note : (Specific benefits for women employees)**

(i) 180 days Maternity leave upto two children. (ii) 45 days leave for miscarriage including abortion. (iii) 730 days child care leave upto two children. (iv) Rs 1000/- P.M. special allowance to women with disability for child care for two years upto two children. (v) Posting of Husband and wife at the same station. (vi) Special priority for working women in allotment of residential accommodation. (vii) Special dispensation for women officers of North East cadre. (viii) Change of cadre in case of marriage of all India services officers.

PROFORMA FOR APPLICATION

APPLICATION FOR THE POST OF _____ In _____ Unit

Paste a self
Attested
Photograph

1. Post applied for :.....
2. Name of the Candidate (in block letters):.....
3. Father's name:.....
4. Date of Birth:...../...../..... (attach copy of Birth Certificate self attested)
5. Age as on last date prescribed for receipt of application: Years.....Month.....Days.....
6. Address for correspondence:
House No/Street/Village.....Post Office.....Distt.....
State.....PIN Code.....
7. Permanent Address :-
House No/Street/Village.....Post Office.....Distt.....
State.....PIN Code.....
8. Caste: Gen/OBC/SC/ST.....(attach copy of Certificate in case of SC/ST/OBC)
9. Educational Qualification:-(attach education certificate self attested)
10. Any other qualification/Experience:.....
11. Category for which applied:- Gen (UR)/OBC/SC/ST/Ex-Serviceman/Meritorious Sport person/
Physically Handicapped.....(Attach copy self attested).
12. Technical Training/Experience.....
13. Domicile:.....(attach self attested copy)
14. Whether registered with any Employment Exchange:- Yes/No: If yes, mention Registration No and
Name of employment exchange
15. Medium of examination: English/Hindi.....
16. I hereby certify that above particulars mentioned in the application are correct and true to the best of
my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be
liable to be terminated without any notice.

Dated:.....

(Signature of candidate)

FOR OFFICE RECORD ONLY

1. Received on.....
2. Accepted/Rejected.....
3. Reason for rejection: Underage/Overage/incomplete documents/Any other reason to be
specified.....
- 4.ex No:.....Date of Test.....

Davp 10801/11/0005/1819