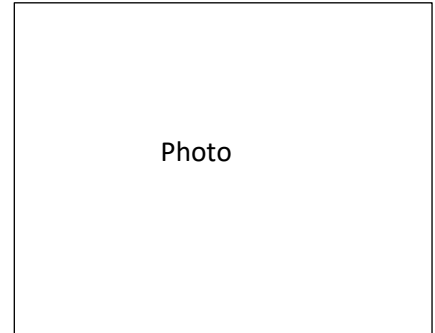


APPLICATION FORM

**APPLICATION FOR THE POST OF CHIEF FINANCIAL OFFICER (CFO) IN
SAMAGRA SHIKSHA ON CONTRACT BASIS**



1. Post Applied for: Chief Financial Officer

2. Gender: Male / Female / Others

3. Name of the Candidate:

(IN CAPITAL LETTERS)

4. Father's / Mother's / Husband's Name:

(IN CAPITAL LETTERS)

5. Date of Birth (DD/MM/YY) _____, Age _____

6. Marital Status: _____

7. Aadhaar Number: _____

8. Address for communication:

STATE: _____

PIN: _____

9. Email address:

(All communications from SAMAGRA SHIKSHA will be made to this e-mail address given by you).

10. Contact Numbers:

a) Landline _____

b) Mobile _____

11. Educational / Professional / Technology Qualification (Starting from Class 12th onwards). Please attach a separate sheet if required.

Examination passed	Discipline / Specialization / Subject	Board/University	Year of Passing	Duration of Course (In Months)	Percentage of marks	Division

12. Experience starting from present to previous. Please attach a separate sheet if required.

Department / Organisation	Designation and Pay Band and Grade Pay / Scale	From	To	Brief description of duties

13. Brief of Financial works handled.

(Please make a statement covering your association with major financial initiatives. You may inter-alia mention the brief description of the initiative, your role and contribution, challenges, and achievements. Please limit it to 1000 words)

14. Please state whether you meet the eligibility criteria. Yes / No

15. Please explain how you are eligible.

16. Additional information, if any, which you would like to mention in support of your candidature for the post. (This among other things may provide information about (i) additional academic qualifications, (ii) professional training, (iii) work experience over and above stated in the notice, and (iv) Publications)

Declaration to be signed by the Candidate.

I hereby certify that the above particulars mentioned in the application are correct and true to the best of my knowledge and belief and no material fact/information has been suppressed or concealed therefrom.

**PLACE:
APPLICANT**

SIGNATURE OF THE

DATE:

Name:

List of enclosures:

- 1.
- 2.
- 3.
- 4.
- 5.