

**PROFORMA APPLICATION FOR CONSULTANT IN THE DEPARTMENT OF  
PENSION & PENSIONERS' WELFARE**

1	Name		Photo of Candidate		
2	Father's Name				
3	Date of Birth & Nationality				
4	Date of entry into service (including service & batch)				
5	Date of retirement (self-attested copy of Pension Payment Order to be enclosed)				
6	Office address at the time of retirement				
7	Phone/mobile with STD code				
8	E-mail address				
9	Address for communication				
10	Educational qualifications				
11	Position(s) held during the last 5 years of service before retirement				
	Designation & place of posting during the last 5 years	Scale of pay	From	To	Nature of work performed
12	Any other information justifying your engagement as consultant*				

\* attach separate sheet, if necessary

I hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I further declare that I was clear from vigilance angle at the time of my retirement. No disciplinary or judiciary action is pending against me as on date.

Place & Date:

(Signature of the Candidate)