APPLICATION FOR TENURE BASED CPW PERSONNEL ON CONTRACT BASIS

To

The General Manager, Cordite Factory, Aruvankadu The Nilgiris – 643 202 Tamil Nadu

Place for recent passport size photo of the applicant (self attested in front) be firmly pasted (not to be stapled)

| | (TO BE FILLED UP IN BLOCK LETTERS ONLY) | | | | | |
|-----|---|---------------------------|------------------------|-------------|--|--|
| 01. | Post Applied for | TENURE BASI CONTRACT B | ED CPW PERSONI ASIS | NEL ON | | |
| 02. | Name in Block Letters | | | | | |
| | (as mentioned in 10 th std. certificate) | | | | | |
| 03. | Father's / Husband's Name | | | | | |
| 04. | Date of Birth | Day (dd) | Month (mm) | Year (yyyy) | | |
| 05. | Age (as on 01-04-2023) | | | | | |
| 06. | Nationality | | | | | |
| 07. | Caste / Category [Mention whether UR/SC/ST/OBC-NCL/EWS/Ex-SM] | | | | | |
| 08. | Address & pin code in full for communication | | | | | |
| 09. | Phone/Mobile Number | | | | | |
| 10. | E-mail ID | | | | | |
| 11. | Two Prominent and visible identification Marks | i) | | | | |
| | | ii) | | | | |

12. Details of educational and other qualifications starting from X Standard/SSLC:

| Name of School/College Name of Recognized University / Examination Year of Passing | | | | | |
|--|----------------------|--------|-----------------|--|--|
| Traine of Benoof Conege | Board of Examination | Passed | Tear of Lassing | | |
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| 13 | Details of Passing | NCTVT | (NAC/NTC) | in AOCP T | rade Examination |
|-----|--------------------|-------|-----------|------------|------------------|
| 15. | Details of Passing | NCIVI | INAC/NIC | III AUCE I | rade Examination |

| Name of | Whether | Name of | Traini | ng period | NCTVT | Year of | Certificate |
|---------|---|-------------------------------|--------|-----------|--------------|---------|---------------------------|
| Trade | Ex-Trade Apprentices Of Ordnance Fys. (Yes/No) | Ord. Fy. Or Institution | From | То | Batch No. | Passing | No. & Date of Issue |
| | | | | | | | |

14. Experience Details

| Company Details | Designation | Period From | Period To | Nature of Duties |
|-----------------|-------------|----------------|--------------|------------------|
| | | | | |
| | | | | |
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| | | | | |
| | | | | |

15. Check List of Enclosures: .

| Sl.No | ENCLOSURES | YES / NO |
|-------|---|----------|
| 1 | Proof of Date of Birth | |
| 2 | Educational Qualification Certificate | |
| 3 | NCTVT (NTC or NAC) certificate in AOCP Trade | |
| 4 | Experience Certificate | |
| 5 | Caste Certificate : (SC / ST / OBC) – in prescribed proforma | |
| 6 | Declaration by OBC/Ex-SM candidates – Appendix – I / Appendix – II | |
| 7 | Completed Bank Details Form for claiming TA (for SC/ST candidates) | |
| 8 | Whether all above documents / certificates are self attested | |
| 9 | Two copies of self attested photographs (one pasted on application form | |
| | and one extra) | |

DECLARATION

| I, Shri / Smt / Kum | have read the instructions carefully before |
|---|--|
| sending this application. I hereby declare that all the sta | tements made in this application are correct to the best |
| of my knowledge and belief. I understand that any | discrepancy found in the information will lead to |
| cancellation of my candidature / debarment at any time. | |
| | |
| | |
| | Signature of the Candidate |
| Date : | Signature of the Candidate |
| Place : | |

APPENDIX - I

DECLARATION BY OBC CANDIDATES ONLY

(Similar endorsement should be given in the caste certificate from the competent authority)

| (|
|--|
| I |
| Resident of village/town/city District |
| State Hereby declare that I belong to the |
| community which is recognized as a backward class by the Government of India for the purpose of |
| reservation in services as the orders contained in DOPT OM No.36012/22/93-Estt.(SCT) dated 08-09-1993 |
| and as amended. It is also declared that I do not belong to persons/sections (Creamy Layer) mentioned in |
| column 3 of the Schedule to the above referred Office Memorandum dated 08-09-1993 and as amended. |
| Date : (Signature of the Candidate) |
| |

APPENDIX - II

FORM OF UNDERTAKING TO BE GIVEN BY CANDIDATES APPLYING FOR CIVIL POSTS UNDER EX-SERVICEMEN CATEGORY

I understand that, if selected on the basis of the recruitment/examination to which this application relates, my appointment will be subject to my producing documentary evidence to the satisfaction of the Appointing Authority that I have been duly released/retired/discharged from the Armed forces that I am entitled to the benefits admissible to Ex-Servemen in terms of the Ex-Servicemen (Re-employment in Central Civil Services and Posts) Rules, 1979, as amended from time to time.

I also understand that I shall not be eligible to be appointed to a vacancy reserved for Ex-Servicemen in regard to the recruitment covered by this examination, if I have at any time prior to such appointment, secured any employment on the civil side (including Public Sector Undertakings, Autonomous Bodies/Statutory Bodies, Nationalized Banks etc.) by availing of the concession of reservation of vacancies admissible to Ex-Servicemen.

Date : (Signature of the Candidate)

BANK DETAILS FORM FOR TA CLAIM RE-IMBURSEMENT THROUGH ONLINE MODE (ONLY FOR SC/ST CANDIDATES)

Advertisement No. CFA/CG/64/AOCP/2023

To The General manager Cordite Factory, Aruvankadu

Dear Sir,

I hereby give my consent to accept the payments of my claim on CFA internet based online e-payments system at the sole discretion of CFA. My bank account details for the said purpose are as under: -

| SI.No | Particulars | Details |
|-------|--|------------------|
| 1 | Name of the Candidate | |
| 2 | Category (SC/ST) | |
| 3 | Name of the post applied for | Tenure based CPW |
| 4 | Address of the Candidate | |
| 5 | Bank Account Number (of the candidate) | |
| 6 | Branch Name and Address | |
| 7 | IFSC Code | |
| 8 | Pan No. (If Allotted) | |
| 9 | Email ID | |
| 10 | Mobile No | |

Original cancelled cheque related to the above account number for verifying the accuracy of the bank details is enclosed.

I, hereby, declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the institution responsible.

Date: (Signature of the Candidate)

Bank verification is required only in case

- a) Candidates not providing a cancelled cheque leaf (original) or if candidates name is not printed/appearing on the cancelled cheque leaf (original) submitted to CFA
- b) Change in existing details.
- c) Please attach photocopy of Bank Pass Book, if cancelled cheque leaf not attached

Bank verification:

I hereby confirm that the above accounts details of the account holder are correct in all respects and the account of the beneficiary (Candidate) is maintained at out Bank Branch.

(Name of the Bank & Branch)
Authorized signatory