Annexure -I

Application format for Empanelment as State Quality <u>Monitor(Roads)</u>

	(Passport size coloured photograph of candidate to be pasted in the box)
1.	Name: (As per service records):
2.	Date of Birth:/
	(in words)
3.	(i) Date of Retirement from Govt. Service:// Date / Month / Year (in case of retired officer) (ii) Total Experience: years
	(iii) Date of Regular Appointment in Academic/ Research Institute: Date/ Month/ Year/// (in case of working officials)
4.	Communication Address:
5.	Contact Information:
٥.	
	(a) Residence base phone:
	(b) Mobile No(s). :
	(c) e-mail ID (in CAPITAL LETTERS) :

6. Educational & Professional Qualifications:

S1. No.	* Degree	Year of Passing	Subject / Discipline / Specialization	University	Remarks
1.	Bachelors Degree				
2.	Masters Degree				
3.	Doctoral Degree				
4.	Other Degree				
5.					
6.					

^{*} enclose copy of Certificates

7.	(i) PAN** number-	••••
	** enclose copy of documents	

8. Employment record of last 10 years of Government service:

S1. No.	Organisation/	Post Held / Level ***	Dur	ation	Details of work
No.	Organisation/ Department	Level ***	From	То	experience

^{***} EE/SE / Addl. CE/ CE/ E-in-C/Secretary/ Professor/ Associate Professor

9. Employment record post retirement:

S1.	Organisation	Position held	Duration		Details of work
No.			From	То	experience

10. Field of Specialization / Special Interest (if any):

11. Post from which retired:

12.	Other Details (Membership of professional bodies, authorship of technical papers, consultancies, etc.): (May attach extra sheet, if required)
13.	Application made for Inspection of: (Check any ONE BOX) Road Projects: Bridge Projects: Road & Bridge Projects: Please attach the list of bridge works associated with: (if applying for inspection of bridge projects or bridge and road projects)
14.	Whether any departmental enquiries / corruption cases initiated against the candidate, during service period: (Yes/No) If yes, - results of the same:
15.	Whether the recommendation of the concerned State Govt. /Govt. of India organization enclosed: (as per Selection Criteria No. 6): (Yes/No) (if no, whether it will be provided by last date?)
Wi	llingness to work as SQM:
	(a) The undersigned is maintaining good health and is willing to take up field inspection assignments and other office works as State Quality Monitor under PMGSY.
	(b) I understand that I may be assigned to carry out field inspections in any District in accordance with the Guidelines.
the misl emp	laration : I hereby declare that the details furnished above are true and correct to best of my knowledge. In case any of the above information is found to be false or eading or misrepresenting, I am aware that I may be held liable for it and my eanelment as SQM may be immediately cancelled and necessary action, as deemed may be taken against me.
	Signature
	Name of applicant:

Date: