

For Office Use, Only

Post Code:POST NAME..... - 20__

Application No. _____

PASTE
LATEST
PHOTO
HERE

**CONVERGENCE OF AGRICULTURAL INTERVENTIONS IN
MAHARASHTRA (CAIM)**

Application Form for the post of

Sr. No. of Post _____ Name of Post _____

(A) Personal Details

Date of Application		
Name (in BLOCK CAPITALS)		
Date of Birth (dd/mm/yyyy) (Age as on __/__/__)		
Address for Communication		
Contact Information:	Landline	Mobile
	Email	
District Preferred (Pl. indicate Head Quarter preference between 1 to 6. Indicate nil preference by 0)	() Akola () Amravati () Buldhana	() Wardha () Washim () Yavatmal

(B) Educational Qualification:

Level	University	Name of Course	Year of Passing	Class Obtained	Major Subjects
Post-Graduation					
Graduation					
Diploma					
Specialized Training					
Other Education					

(C) Competency:

***Attach Additional sheets, if required.**

Please list your areas of highest competency, special skills or other items that may contribute to your abilities in performing the mentioned position. (e.g.: Project management, Leadership, Team work, Negotiator/communicator, Facilitator of Change, Performer etc.)

(D) Experience

***Please list beginning from most recent**

From - To	
Employer	
Position & Location	
Duties	

From - To	
Employer	
Position & Location	
Duties	

From - To	
Employer	
Position & Location	
Duties	

(E) Experience Relevant to the Post Applied:

(F) References with contact details:

1.
2.

(G) Declaration:

I hereby declare that the information furnished above is true to the best of my knowledge and belief.



[Handwritten Signature]
प्रशासकीय अधिकारी (Signature of the Applicant with Date)
समन्वयित कृषि विकास प्रकल्प
2 अमरावती.