APPLICATION FOR INTERNAL AUDIT CONSULTANT ON PURELY TEMPORARY BASIS.

Affix recent passport size photograph here

| | | | | here _ |
|----|---|---|---------------------------|--------|
| 1 | Position to which applied | : | INTERNAL AUDIT CONSULTANT | |
| 2 | Advertisement No. | : | CPRI/13/2025 | |
| 3 | Category (UR/EWS/OBC/SC/ST) | : | | |
| 4 | Name in full (in Block letters) | : | | |
| 5 | Date of Birth (Enclose a copy of certificate in support of age) | : | | |
| 6 | Age as on 07.11.2025 | : | | |
| 7 | Nationality | : | | |
| 8 | Father's/Husband's name | : | | |
| 9 | Marital Status | | | |
| 10 | Address for correspondence (in Block letters) | : | | |
| 11 | Permanent Address (in Block letters) | : | | |
| 12 | E-mail ID | : | | |
| 13 | Mobile No. | : | | |

14. Education Qualification:

Educational/professional qualifications(indicating clearly the examinations passed, University / Board, Year and Month of passing, class and percentage of marks) copies of all marks sheets should be enclosed along with certificates, failing which the application will be rejected:

| Examination Passed | Year and Month of passing | Board/University/ Institution | % of Marks (Aggregate of all semester) | Class/ Division obtained | Subject Specialization |
|-----------------------|---------------------------------------|----------------------------------|---|--------------------------------|---------------------------|
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Details of the previous/present employment held, in chronological order starting from present position backwards.

| Name of the Organization with address | Designation of the post | Service | e Period | Salary drawn | Nature of duties |
|---------------------------------------|-------------------------|---------|----------|-----------------|------------------|
| with address | of the post held | From | То | | |
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| 16 | Whether you have been convicted by any Court of Law? If yes, please give complete details thereof. | |
|--------------|--|--|
| 17 | Are you pursuing any Higher Education, if so, please give details. | |
| 18 | Whether belongs to Persons With Benchmark Disability (PWBD). | |
| 19 | Are you under any Contractual Obligation to serve the Govt. / Semi-Govt. / Public Sector undertaking? If So, give details. | |
| 20 | Have you executed any bond to present Employer, if so, please give details? | |
| 21 | If selected, the minimum time required for joining. | |
| 22 | Details of Seminar/Training/short term courses/Certification Course attended. | |
| KNOV MY A | RTIFY THAT THE INFORMATION FURNISHED WLEDGE & BELIEF. IF AT ANY STAGE, ANY IN | ARATION IN THIS APPLICATION IS TRUE TO THE BEST OF MIFORMATION IS FOUND TO BE FALSE OR INCORRECT ND MY TEMPORARY ENGAGEMENT IS TERMINATED REFOR. |
| Plac | e: | |
| Date | : : | (Signature of candidate) |