



cmpdi
A Mini-Ratna Company

सेन्ट्रल माईन प्लानिंग एण्ड डिजाइन इन्स्टीच्यूट लिमिटेड
(कोल इण्डिया लिमिटेड की अनुषंगी कम्पनी / भारत सरकार का एक लोक उपक्रम)
गोन्दवाना प्लेस, काँके रोड, राँची - 834 031, झारखंड (भारत)
Central Mine Planning & Design Institute Limited
(A Subsidiary of Coal India Limited / Govt. of India Public Sector Undertaking)
Gondwana Place, Kanke Road, Ranchi - 834 031, Jharkhand (INDIA)
CORPORATE IDENTITY NUMBER - U14292JH19756OI001223

DECLARATION FORM

Annexure – VII

PERSONAL DATA OF NON-EXECUTIVE EMPLOYEE AT THE TIME OF ENTRY INTO THE SERVICE

STAFF NO (for Office Use Only)

NAME (in BLOCK Letters)

DATE OF BIRTH (dd/mm/yyyy)

PLACE OF BIRTH

DESIGNATION _____ GRADE / CATEGORY _____

CASTE _____ RELIGION _____ NATIONALITY _____

MARTIAL STATUS Married / Unmarried / Divorced (Strike out whichever is not applicable)

SEX BLOOD GROUP _____

FATHER'S / HUSBAND'S NAME

COMMUNICATION ADDRESS

ADDRESS (Line 1)

ADDRESS (Line 2)

CITY / VILLAGE POST OFFICE

POLICE STATION DISTRICT

STATE PIN CODE

TELEPHONE No MOBILE No

PERMANENT ADDRESS

ADDRESS (Line 1)

ADDRESS (Line 2)

CITY / VILLAGE POST OFFICE

POLICE STATION DISTRICT

STATE PIN CODE

Email:

Address of Office of Supdt. Of Police under whose jurisdiction, above Police Station comes:

MARK OF IDENTIFICATION:

P. F. NO. (for Office Use Only)

NAME OF THE NOMINEE FOR P. F.	RELATION WITH THE NOMINEE

NAME OF THE NOMINEE FOR GRATUITY (FORM L to be attached)	RELATION WITH THE NOMINEE

PARTICULARS OF CHILDREN (if Applicable)

Sl. No	NAME	DATE OF BIRTH	SEX	STANDARD STUDYING	INSTITUTE	MEDIUM OF INSTRUCTION

PARTICULARS OF NEXT KIN FOR COMMUNICATION IN CASE OF EMERGENCY:

NAME

RELATIONSHIP

ADDRESS:

MOBILE TELEPHONE

PHYSICAL FITNESS

HEIGHT	IDENTIFICATION MARK	DISABLEMENT (if any)

QUALIFICATION:

(A) ACADEMIC & PROFESSIONAL QUALIFICATION FROM MATRICULATION ONWARDS:

EXAM PASSED	UNIVERSITY / INSTITUTE	DURATION		YEAR OF PASSING	SUBJECT	DISTINCTION (if any)
		FROM	TO			

(B) DETAILS OF TRAINING IN INDIA AND ABROAD:

NAME OF THE INSTITUTION	DURATION		NATURE OF TRAINING
	FROM	TO	

(C) ANY BOOK OR PAPER PUBLISHED:

Membership of any Professional Organization including any elective positions held in any reputed professional body:

Whether you are convicted by any court for moral turpitude. If so, the offence and punishment awarded:

Details of punishments or commendation while in service prior to joining CMPDI:

SUMMARY OF EMPLOYMENT WITH OTHER ORGANISATIONS (if any) BEFORE ABSORPTION IN CMPDI:

NAME OF THE ORGANISATION	ORGANISATION TYPE	DESIGNATION	DURATION		SCALE OF PAY	TYPE OF EMPLOYMENT	REASONS FOR LEAVING
			FROM	TO			

PRESENT PLACE OF POSTING: _____

EXTRA CURRICULAR ACTIVITIES/
HOBBIES: _____

ANYTHING ELSE YOU WANT TO
TELL US: _____

DECLARATION:

I, _____ solemnly affirm that the above declaration is correct and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service and other actions as per the law of land.

Signature of Non-Executive concerned

Date:

IMPORTANT:

1. Year of passing certificate of competency examination: Give the year in which certificate was issued and not the year of examination.
2. Please enclose attested photo copies of all the certificates relating to the date of birth, qualification and experience in support of your statement above.