APPLICATION FORM FOR THE POST OF CONSULTANT (ACCOUNTS)											
PERSONAL DETAILS											
NAME (in full and BLOCK LETTERS)											
Father's Name				Please paste a recent colour passport size photograph							
Mother's Name											
Gender			Date of Birth								
Languages Known			Age as on 01.07.2025								
Aadhar No.			Pan No.								
Nationality											
For Candidates working / last working in Government / State Govt. / PSU / Autonomous Body: Name of the company / Instituation			For Candidates working / last working in Private Sector: Name of the company / Instituation								
Address for Communicati	ion										
House No. / Flat No.											
Street											
Nearest Rly. Station											
Post office		Pincode									
District		State									
Mobile No.		Email ID									

Education Qualification (From Gradate Level onwards)										
Cours	e	Specialization (if Applicable)	Year of passing	Name of the Institute	Board / U	Jniversity	% of Marks			
Gradu	ation									
Post-	Graduation									
LLB										
Any Other Qualification										
Memb Fellov	of ICAI / ICMAI ership (Associate or v), Membership No. e of admission		1							
Post (Qualification Experi	ence (Attach Self	attested docun	nentary Proof)						
Sl. No.	Name of the Organization	Central Govt/ State Govt. / PSU/ Autonomous Body / Private	Annual Turnover of the Company	Grade / Designation Pay Level/ Basic Pay per month. CTC for the Pvt Candidates	Period		Total Period			
NO.					From	То	renou			
Total duration of experience										
Details	of Computer/IT Skills:									