

Service of Applicant		Period for which employed			Not to be filled by the applicant	
Date of Commencement 1	Date of termination 2	Years 3	Months 4	Days 5	Initial of Verifier 6	Remarks 7
Total Service						

Service Period for which certificates are produced :- _____
 Service Period for which no certificates are produced :- _____

Part IV : DECLARATION TO BE MADE BY THE APPLICANT

I do hereby declare that the statements made in Part I, II and III of this Form are correct and true to the best of my knowledge and belief; and that the papers enumerated in Part II and submitted with this form are true and genuine documents and further that the copies of the documents submitted with this form are true and correct. I further declare that the statements made in Part III contain a true and correct account of the whole period of my service without exception, and I made this declaration conscientiously believing the same to be true.

Dated atthis.....day of.....20 _____
 Signature of the applicant

Present Address: _____

Pin Code :

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Note:

- 1) Every application must be accompanied with the requisite fee. Fees paid in to the Govt.Treasury by E-payment through www.GRAS.mahakosh.gov.in
- 2) Two copies of recent bust photograph of the applicant (50mm x 65mm) must accompany the application with applicant's and signature on the back of one copy.
- 3) Any, person making a false statement for the purpose of the admission to the examination renders himself liable to prosecution.
- 4) Incomplete application is liable to be rejected.

Part V : (Not to be filled by the applicant)

Certified that Shri.....has been examined for Certificate of Proficiency as Boiler Operation Engineer/Competency as a First or Second Class Boiler Attendant and that he has passed/failed in the examination held during

Issue of Certificate of Proficiency as Boiler Operation Engineer/Competency as a First or Second Class Boiler Attendant when certified to have passed.

Personal description of applicant

1) Height: Centi Metres : _____ 2) Marks of Identification:- 1) _____
 2) _____

Certificate No.:- _____ Issued on :- _____ and duplicate recorded.
 Outward No.:- _____

(Secretary)
 Board of Examiners