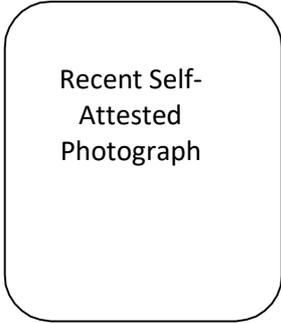


**NATIONAL COUNCIL FOR HOTEL MANAGEMENT
AND CATERING TECHNOLOGY
A-34, SECTOR-62, NOIDA**

Application format for the post of Accountant (On Deputation)

(Closing Date: 19.09.2024)



1	Name (in capital letters)	-	
2	Mother's Name	-	
3	Father's Name	-	
4	Address for correspondence	-	
5	Permanent address	-	
6	Whether GEN, OBC, SC, ST.	-	
7	Whether PH	-	

8	Date of birth:		Date of birth of the Candidate	Whether fulfilling the eligibility age criteria and how
	Category	As on Closing Date		
	↓	↓	↓	↓
	Open Category (56 years on the date of vacancy)	19.09.2024		

9	Educational Qualifications and Experience (Must have fulfilled all the requirements mentioned in the Employment Notification. Part fulfilment of requirement will not make the candidate eligible) :		
Required Essential Qualification & Experience	Qualification & Exp. possessed By the Candidate % of marks	Whether fulfilling the eligibility criteria and how	
<p>Officer in Central/ State Govt., Autonomous Bodies, PSUs having-</p> <ol style="list-style-type: none"> 1. SAS (Subordinate Accounts Service) Accountants from any of the organised Accounts Departments. 2. Assistants with 5 years or UDCs with 8 years of service in the Govt. Deptt. And having undergone training in Cash and Accounts at Institute of Secretariat Training and Management. 			

10	Other Educational Qualification if any in chronological order: (Use separate sheet if space is insufficient)		

11	Contact Telephone No. Of the Candidate:	-	Mobile: Land Line:
12	Contact e-mail ID of the Candidate:	-	
13	Whether employed under Central/ State Government/ Autonomous Body/ PSU:	-	
14	Whether any punishment imposed by the employer during last 10 years and whether any disciplinary case is pending or contemplated presently:	-	
15	Present post held and pay drawn last:	-	Post: Pay Scale:
16	Any special Achievement during past service and awards/ Prizes received:	-	

17	Name, Designation and contact details of two referees, not related to him/ her:	
1)		2)

Declaration by the Candidate:

I hereby certify that, the information furnished in point 1-17 above by me is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. I am aware that, if any of the information furnished by me is found false or incorrect at later stage, my candidature is liable to be cancelled and even if it detects after my appointment, the service is terminable forthwith, without giving any opportunity or notice or reason.

Place:

Date:

Signature of the Candidate
Name of the Candidate:

Endorsement by the Employer:

- i) It is certified that, the information furnished by the applicant at point 1-17 above is matching to this office record. He/ She is a permanent employee of this organisation.
- ii) Attested copies of last 5 years APAR (duly completed) of the applicant is attached.
- iii) No minor or major punishment has ever been imposed on the applicant by this office during last 10 years. (In case the tenure of the applicant with the organisation is less than 10 years, any information about initiation of Disciplinary action against him/ her at the previous organisation be shared/ mentioned).
- iv) No Vigilance/ Disciplinary case is either pending or contemplated against the applicant in this organisation.
- v) The undersigned is authorised by this organisation to endorse on the above lines and forward the application of the applicant.

Place:

Date:

Signature of the Endorsing Authority
Name of the Endorsing Authority:

(Office Stamp)

National Council for Hotel Management & Catering Technology, NOIDA

Application Format for the post of Accountant (Direct Recruitment)

Advertisement No.: NCHM-03/2024-ADMIN	Closing Date : 19/09/2024
---------------------------------------	---------------------------

Paste self
attested
recent
Passport Size
Photograph

01	Name of the Candidate (in Block Letters)			
02	Date of Birth (DD/MM/YYYY)	Age as on 19/09/2024		
		Years	Months	Days
03	Father's Name			
04	Nationality			
05	Gender	Male / Female / Transgender		
06	Marital Status	Married / Unmarried		
07	Category	UR / OBC / SC / ST		
07.a	If UR, Whether under EWS Category? (if Yes, enclose necessary attachments)	Yes / NO		
08	Whether Physically Challenged ? (if Yes, enclose necessary attachments)	Yes / NO		
09	Whether Ex. Serviceman ? (if Yes, enclose necessary attachments)	Yes / NO		
10.a	Present / Communication Address			
10.b	Permanent Address			
11	Contact No.	Telephone		
		Mobile No.		

12	E-mail id.	
----	------------	--

13. Educational Qualifications (Use additional sheets, if required)

S.No.	Examination Passed	Year of Passing	Board/ University/ Institution	Division/ Grade/ Percentage of Marks
01				
02				
03				
04				
05				

14. Experience Details

(in chronological order beginning from the present job. Use additional sheets, if required)

S.No.	Name of the Organisation	Post Held	Pay Drawn	From	To	Nature of Duties
01						
02						
03						
04						

15. Training Programme Attended, if any (Use additional sheets, if required)					
S.No.	Name of the Training	Organised by	Duration	Period of Training	
				From	To
01					
02					
16. Any other relevant information (Use additional sheets, if required)					
17. List of enclosures					
Documents Required			Enclosed Document Details		
a. Educational Qualifications proof					
b. Date of Birth proof					
c. Category proof (if applicable)					
d. Disability proof (if applicable)					
e. Experience proof					

Declaration :

I declare and fully understand that in the event of any information furnished in this application being found to be false, misleading or in correct at any stage, my application/candidature is liable to be summarily rejected and if I am already appointed, my services are liable to be terminated without any notice as per the Act/ Statutes, etc., and other applicable rules of Government of India. I also hereby declare that I have never been convicted for any offences and there are no criminal/ departmental proceedings pending/ contemplated against me.

Place:

(Signature of the Applicant)

Date:

Name :