

Application for the position of Program Director (PD)

**Sign across
with black ink**

I Personal Details

1. Name : Mr./Ms. _____
(First Name) (Middle Name) (Last Name)
2. Mother's Name : _____
(First Name) (Middle Name) (Last Name)
3. Father's Name : _____
(First Name) (Middle Name) (Last Name)
4. Date of Birth : _____
(Date) (Month) (Year)
5. Age : _____ Years ----- months (as on December 31, 2025)
6. Marital Status : Married/unmarried
7. Nationality : _____
8. Religion : _____
9. Caste : Gen/SC/ST/OBC
10. Mailing Address : _____
(with Pin code) _____
11. Permanent Address : _____
(with Pin code) _____
12. Telephone No. : _____
(STD Code) Land Line Number (s)
13. Mobile No. : _____
14. E-mail ID : _____

II Educational Qualifications (High School onwards) (You may add extra sheets, if necessary)

Name of the School / College / Institution	Year of Passing	University / Board	Subject (HSC) / Degree	Specialisation (if any)	Marks in Percentage or Grade as available in the Mark Sheet

Additional Qualifications (You may add extra sheets, if necessary)

Name of the Institution	Certificate in	Specialisation (if any)	Year of Passing	Marks in Percentage or Grade as available in the Mark Sheet

III Work Experience (Please refer to the responsibilities for the post as mentioned in the advertisement)

1. Experience in work (start from the present Employer)

Name of the Organisation (With full address including contact details)	Position held	Total period of Experience			Major responsibilities	Gross Annual Salary
		Period From	Period To	Total Period in years		

2. Any qualification/Experience in MS office, Graphics Design and Data Management (You are free to attach separate sheet)

3. Write in brief, why do you consider yourself suitable for this position? (You may add extra sheets, if necessary)

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IV Additional Information

1. **Any other information (including awards received etc.), please specify**

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2. **References**

Sr. No.	Name	Address	Email ID	Mobile / Land Line Number(s)

Please indicate if NOC is required to be taken from your past/ present employer :
Yes/No

V Health condition

(Serious illness, if any)

Note: Furnishing of FALSE information in the case of a candidate selected and engaged will be treated as a misconduct.

Declaration

“I _____ (name of the candidate), hereby declare that all the information submitted by me in the application form is correct, true and valid. I will present the supporting documents as and when required.”

Date:	Place:	Signature: <i>(Please do not sign in capital letters)</i>
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