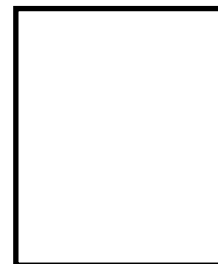


PUNJAB STATE CIVIL AVIATION COUNCIL

Civil Aerodrome, Sangrur Road, Patiala – 147001 (Punjab)

(Tele: - 0175 - 2970697, Email – admnpscac@gmail.com)

(For the post of Instructor (Air Frame))



1. Name of the post applied for _____
2. Name of the applicant (in block letter) _____
3. Male/Female _____ 4. Married/Unmarried _____
4. Father's Name _____
5. Mother's Name _____
6. Correspondence address

7. Permanent address

8. a) Telephone Number _____ b) Mobile Number _____
c) Email ID _____
9. Date of Birth _____, Age as on date of advertisement _____
10. Nationality _____
11. The applicant must get a medical certificate from a doctor possessing at least an MBBS degree. Candidates shall not have any physical disabilities or colour blindness, which may interfere in discharging the duties as an Instructor.
12. **Educational Qualifications (starting from 10th onwards):**

Examination	Name of Board/University	Main Subjects	Year of passing	Total marks	Total marks obtained	% of marks

b) **Technical Qualification:**

Examination Passed	Year of Passing	No. of attempts	Class/Division	University/Institution

c) **DGCA AME Examination Passed, if applicable :**

Examination Passed	Year of Passing	BAMEL No. (If any)	Institution

d) **Aviation Experience:**

Examination Passed	Period		Institution
	From	To	

e) **Computer Literacy**

Examination Passed	Year of Passing		Class/Division	Institute Name
	From	To		

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13. **Experience:** (Please attach self attested copies of experience certificates)

Post held (Also indicate Temporary contractual/regular)	Period		Pay Scale and Salary per month (last drawn)	Name of Organisation
	From	To		

Total Experience: Years _____, Months _____

Any other experience (If any)

14. Any other details which strengthen your claim for appointment. (Attached separate sheet, if necessary)
15. **Referees** (They should be professionally competent persons, well acquainted with the applicant's working, capability and character, but must not be relative.)

Name /Status/Address

(i) _____

(ii) _____

16. a) If employed, present designation and pay scale _____
- b) Name of present employer _____
- c) Have you obtained permission of your present employer? _____
- d) Present or last drawn gross salary drawn _____
- e) If selected, joining time needed _____

17. **Application Fee (As demand draft)**

Demand Draft No. _____ Date _____ Bank Name _____

18. Self-evaluation of your work, particularly its strengths in different fields of activity including teaching, research, administration etc., related to the post applied for, may be given as **Annexure – I**.

19. Attach self-attested copies of certificates/degrees/experience certificate in support of age, category, qualification and experience etc. by mentioning in the list enclosed **Annexure – II**.

20. I will abide by all terms & conditions of the Council.

Date _____

Signature of the candidate

Place _____

DECLARATION BY THE CANDIDATE

Post applied for _____ in Punjab State Civil Aviation Council.

I hereby declare that the above information is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my candidature is liable to be rejected in the event of any misstatement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reason thereof.

Date:

Place:

Signature of the candidate

SELF EVALUATION

Date:

Signature of Applicant

DETAIL OF DOCUMENTS ATTACHED ALONG WITH APPLICATION

S. No.	Name of document attached	Page No.

(Signature of the Candidate)