

PROFORMA

**APPLICATION FOR SELECTION TO THE POST OF PRESIDING OFFICER,
DEBTS RECOVERY TRIBUNALS (DRTs)**

PART-I

1. Name in Full (in Block Letters) :
2. Date of Birth :
3. Father's/ Husband's name :
4. Present Address:
 - (i) Office (Address and Tel. No.)
 - (ii) Residence (Address and Tel. No):
 - (iii) Mobile No.
 - (iv) Email ID:
5. Parent department's complete Address:
(With Telephone No., FAX No. and E-mail ID*)
6. Educational qualifications :
7. (a) Date of entry in the service, if applicable:

(d) Name of service:
8. Details of postings (in last 10 years):

Recent
passport size
photograph
duly signed
by the
applicant

S. No.	Designation	Department/ Office	Organisation	Period	
				From	To

9. (a) Present post held:
 - (b) Date of appointment in present post, on regular basis:
 - (c) Present Pay-Scale:
 - (d) Present Basic pay:

10. Date of Retirement :
11. (a) Whether any Disciplinary action/ charge sheet is pending/contemplated:
- (b) Date of return from previous Deputation, if any:
- (c) No. of cases disposed of in past 2 years:
(in case of Judicial Officers only)
12. (a) Date of Enrollment as Advocate :
- (b) Years of practice :
- (c) Whether enrollment Certificate is surrender:
with Bar Council
- (d) If so, since when:
13. (i) Annual Income (in case of practicing Advocate):
(Please enclose copy of ITR for AY 2018-19)
- (ii) Professional Income (AY 2018-19)
14. How qualified for the post applied for :
(Please give full details)
15. Whether belongs to SC/ ST/ OBC :
16. Preference for place of posting: 1__
(In respect of existing vacancies 2__
3__
4__
5__
17. Preference for place of posting 1__
for the panel in respect of 2__
unforeseen vacancies that may 3__
arise upto 31.12.2019
18. Any other Qualifications/ Experience
not covered above :

Certified that the information furnished above by me is correct.

Place: _____
Date : _____

(Name & Signature of Candidate)

PART-II

(To be filled by Cadre Controlling Authority of the Applicant.)

OFFICE OF

Certified that the particulars given above by the applicant are correct as per records available in the registry of the Supreme Court/ High Court/ records of Department/ Office of (strike off whichever is not applicable).

2. It is also certified that Shri/Smt./Ms. is clear from vigilance angle and no disciplinary case is pending or contemplated against the officer.

3. It is also certified that Integrity of Shri/Smt./Ms. is

4. The attested copies of the Annual Confidential Reports (ACRs)/ Annual Performance Appraisal Reports (APARs) for the last 5 years i.e. 2012-2013 to 2016-2017 (Other than High Court Judges/ Advocates) are enclosed [If ACR/APAR for a period more than 3 months is not recorded then ACRs/APARs prior to 2012-2013 for the matching period need to be forwarded alongwith No Report Certificate (NRC).

5. It is hereby certified further that this Department/Office shall have no objection to the relieving of the said officer, in case he/she is selected for the post of Presiding Officer, Debts Recovery Tribunal.

(Name & Signature & Tel. No.
of Officer with Official Stamp)

Place: _____

Date: _____

OFFICE OF
(Cadre Controlling Authority)

Certified that the particulars given above are correct as per records available in the registry of the Supreme Court/ High Court/ records of Department/ Office of (strike off whichever is not applicable).

It is also certified that Shri/Smt. is clear from vigilance angle and no disciplinary proceeding are pending or contemplated against the officer. The Annual Confidential Reports for last 5 years i.e. 2012-13- to 2016-17 (Other than High Court Judges/ Advocates) are enclosed.

It is hereby certified further that this Department shall have no objection to the relieving of the said officer, in case selected for the post of Chairperson, Debts Recovery Appellate Tribunal.

**(Name & Signature of Officer
with Official Stamp)**

Place: _____

Date: _____