

ANNEXURE – II

Application for the Post of LAW OFFICER (Contract Pay) in the Directorate of Backward Classes Welfare, Chennai -5

1	Name of the Applicant in full (in Black Letters with Father's Name within brackets)	:	
2	Sex, Age and Date of Birth	:	
3	Qualification	:	
4	Name of the Post Applied for	:	
5	Whether he /she is an Advocate of the High Court	:	
6	Date of enrolment (Certificate from Bar Council to be attached)	:	
7	No. of years of standing at the Bar	:	
8	Whether the applicant is of a) Sound health b) Active habits c) Free from any bodily defect or	:	
9	Whether the applicant has paid income Tax for professional Income for a period for three years preceding the date of application (Particulars of Tax paid are to be furnished)	:	
10	Whether the applicant belongs to SC/ST/BC/MBC / DNC / Others	:	
11	Other Particulars which the applicant desires to mention	:	
12	Special reasons if any in which he / she desire to be considered	:	

Place :

Date:

Signature of the Applicant

(Note: Xerox copies of proof of for Age, Qualification, Tax paid and Community etc., are to be enclosed)

ANNEXURE - III

**ADDITIONAL PARTICULARS to be submitted by the Applicant for the post of
Law officer (Contract Pay) in the Directorate of Backward Classes Welfare,
Chennai -5**

1. Name in full
2. Father's Name
3. Present Address
4. Date and place of birth (Proof of date of birth to be furnished)
5. Permanent Address
6. Educational qualifications showing the places of education with years in school and college since 15th year of age (copies of certificates to be furnished)

Name of School / College with full Address	Date of entry in	Date of leaving	Examinations passed
1	2	3	4

7. Address where the candidate has resided for more than one year during proceeding five years		
From	to	Residential address in full i.e. village, Police Station, District, House No., Street / Land / Road etc.,
1	2	3

8. Particulars of previous employment					
Full address of the office / institution	Designation of post held / description of work	Last Pay drawn allowances to be shown separately	Period		Reasons for termination or resignation
			From	To	

Signature of Applicant