GOVERNMENT OF INDIA
DEPARTMENT OF ELECTRONICS & INFORMATION TECHNOLOGY
ELECTRONICS NIKETAN, 6 C.G.O COMPLEX,
NEW DELHI - 110003

APPLICATION FORM FOR NON-OFFICIAL (TEMPORARY PASS)
TO BE FILLED ONLY IN CAPITAL LETTERS

PART I
(To be filled by the applicant)

| Photo (3x3 cms with 75% area covered with image of the face) to be pasted here front attested by sponsoring Authority |
| Photo (3x3 cms with 75% area covered with image of the face) to be pasted here front attested by sponsoring Authority |

Signature of the Applicant in the box above

1. Name
   (Block Letters)
   (First Name) (Middle Name) (Surname)

2. Father's/Husband's
   (Block Letters)
   (First Name) (Middle Name) (Surname)

3. Date of Birth
   D D M M Y Y

4. Sex
   (Tick appropriate Box)
   M F

5. Mark of Identification

6. Name of the FIRM you are associated with (as an employee/Office bearer or in other capacity) Designation of employee/labour/daily wager.

7. Section/Division in which working.


9. Period for which required

10. Permanent Residential Address & Telephone No.

11. Local Address & Telephone No. if any (in case of native out of Delhi)
12. Name & Address of Relative (s) in Delhi with telephone No. if any
13. Name and Address of Previous Employer.
14. Whether renewal/fresh/lost/Mutilation
15. Whether prosecuted under any criminal Case in the past.
16. Whether police verification has been done or not

Note :- The following document must be enclosed with the application form.
1. Copy of valid contract.
2. Names of the labourers specified by the contractor on letter head of the Company/Firm.
3. Character certificate from a Gazetted Officer or Police Authorities.

Date :
Place:

Signature of Applicant
Mobile No.
Intercom No.:-

PART-II
CERTIFICATE

I certify that the information given by the applicant in part I of the application form are correct. The C&A verification in respect of the applicant will be got done as soon as possible.

2. I also certify that character and integrity of the engaged labourers/supervisors/ workers is beyond doubt. I am fully responsible and indemnify to the Department for their misconduct/theft/mishappening caused to the Building and its property/occupants.

Signature of the Authorized Signatory of the Agency/Contractor with Seal.

Mobile No. :-

PART-III
Certificate and Recommendation of Recommending Authority

I certify that the applicant has been awarded contract/appointed on contractual basis in the Department.

Signature of DD(Genl. Admn.)/ID(Bldg)/AE(E)/Controlling Officer
Name
Designation
Division
Rubber Stamp