

Application Form for Professional Examination (AAE/AE) during April-2023

Application for admission to Professional examination of Additional Assistant Engineer/Assistant Engineer (Civil/Mechanical) to be held at Gujarat Jalseva Training Institute, Gandhinagar during April-2023

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To,
The Chairman,
Examination Committee
Gujarat Jalseva Training Institute
Gujarat Water Supply & Sewerage Board
"G" Road, Sector-15,
Gandhinagar-382016

Sir/Madam,
I _____ working as a Additional Assistant Engineer/Assistant Engineer (Civil/Mechanical) in the office of _____ request to apply for the admission to appear in the Professional examination of Additional Assistant Engineer/Assistant Engineer (Civil/Mechanical) cadre to be held at Gujarat Jalseva Training Institute, Gandhinagar center during Feb-2023.

The details required in accordance with rules, which are given as under, are correct to the best of my knowledge.

1	Full Name (As per Service Book Record)	Surname	First Name	Father's / Husband's Name
2	Designation (v Tick Mark)	Additional Assistant Engineer/Assistant Engineer		
3	Wing (v Tick Mark)	Civil/Mechanical		
4	CPF Number			
5	Mobile No			
6	E-Mail Address for communication			
7	Date of Birth (dd/mm/yyyy) (Attach Attested copy of Birthdate certificate - Birthdate should be as per office record)			
8	Age			
9	Name of Office			
10	Office Address for communication			

11	Date of Initial/Regular Appointment (Irrespective of probation period) Attach Order of Initial/Regular Appointment		
12	Experience in years (after Initial/Regular Appointment)		
13	Eligibility (As per experience criteria - 4 Year for AAE & 1 Year for AE)	Eligible / Non-Eligible	
14	Category (SC / ST / General) (Attach Attested copy of Cast Certificate)		
15	Whether he/she has appeared in Professional examination previously? If Yes, Provide Details ✓ Tick Mark	Yes/No	New Candidate/Repeater
16	Eligible No of Trials (For General category - 2 No's & for SC/ST Category - 3 No's)	2 / 3	
	Trial-1 Details		
17	Month & Year of Examination		
18	Roll No		
19	Attach copy of Mark sheet	Yes/No	
	Trial-2		
20	Month & Year of Examination		
21	Roll No		
22	Attach copy of Mark sheet	Yes/No	
	Trial-3		
23	Month & Year of Examination		
24	Roll No		
25	Attach copy of Mark sheet	Yes/No	
26	If completed eligible numbers of trials, then produce a recommendation letter of Superintendent Engineer	NA/Yes/No	
Checklist			
1	Attach Self Attested copy of Order of Regular Appointment/Promotion		
2	Attach Self Attested copy of Birthdate certificate - Birthdate should be as per office record		
3	Attach Self Attested copy of Cast Certificate		
4	Attach Self Attested copy of Mark sheet for Trials		
Note: Examination form will be rejected for incorrect data, insufficient documents & submitting old form			
Date:		Signature of candidate	
Certified that the particulars of Mr./Mrs./Ms. _____ shown overleaf are verified with service records & found correct.			
Date:		Signature & stamp of forwarding officer	