

APPLICATION FORM For.....

To,

**Chief Executive Officer,
Chhattisgarh Certification Society, India
For Forestry & Agriculture (CGCERT)
SFRTI Campus, Near Old Vidhan Sabha, Zero Point
Baloda Bazar Road, Raipur C.G-493111**

Applicant is required to Paste his / her recent colored photograph inside the box.

BIODATA OF APPLICANT

1- Name of Applicant

2- Full Correspondance Address

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3- Date of Resignation

(if worked under any Organic Certification Agency)

4- Mobile No.

5- E-mail ID

6- Practical / Basic Computer Knowledge Yes No

7- Educational Qualification (Acending order)-

S.No.	Qualification	Subject	Year of Passing	Name of University	%

Note -Attach self-verified copy of qualification certificate.

8- Trainings on Organic Certification Programme (NPOP/NOP) -

S.No.	Name of CB/Institution	Place	Duration	Topics of training

Note -Attach self-verified copy of proof of training attended.

9- Trainings on Forestry/Agriculture & Other related Programme-

S.No.	Name of Organization/Institution	Place	Duration	Topics of training

Note -Attach self-verified copy of proof of training attended.

10- Work Experience under Organic Certification Body (NPOP/NOP) and / or Forestry/Agriculture & Other related Govt./Semi Govt Departments -

Name of CB/ Orgazation	Post held	Date of Joining/Empanelment	Period	Job description

Note -Attach self verified/attested copy of joining letter/proof of work experience and other credentials.

(Signature of Applicant)

DECLARATION

I (Name of Applicant) have read and understood all the terms and conditions for empanellment, which I agree completely. All the information provided in the application is true to the best of my knowledge and belief. If any information is found to be incorrect / false, in that case Chhattisgarh Certification Society India for Forestry & Agriculture (CGCERT) will be free to take action as per rules, for which I have no objection.

Date -.....

Place -.....

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(Signature of Applicant)