



Application No. :   
 (For office use only)

11. (a) Nationality <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(b) Citizenship <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(c) Religion <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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12. Have you ever served in the Army/ Navy/ Air Force / Territorial Army or NCC in any capacity (Yes / No) :

13. Details of Service in the Armed Forces

(a) Service : <input type="text"/> <input type="text"/> <b>Code :</b> Army - 01, Air Force - 02, Navy - 03, TA - 04, NCC - 05	(b) Arm / Service <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(c) Unit <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
(d) Service No <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(e) Date of Enrolment <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(f) Date of Commission <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
(g) Date of Retirement / Release <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(h) Substantive Rank held <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(j) Medical Categories at the time of retirement / release <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
(k) Reasons for Discharge / release from service : <input type="text"/> <input type="text"/> <b>Code :</b> Released - 01, Medical invalidated - 02, Premature Retirement - 03, Superannuation - 04, Removed/ Dismissed - 05, Resigned - 06, Others - 07		

14. (a) Number of attempt already made in PIB for commission in TA. <input type="text"/> <input type="text"/>	(b) Number of attempt already made in SSB <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="padding: 5px;">NDA</td> <td style="padding: 5px;">CDSE</td> <td style="padding: 5px;">TA</td> <td style="padding: 5px;">OTHER</td> </tr> <tr> <td style="padding: 5px;"><input type="text"/><input type="text"/></td> <td style="padding: 5px;"><input type="text"/><input type="text"/></td> <td style="padding: 5px;"><input type="text"/><input type="text"/></td> <td style="padding: 5px;"><input type="text"/><input type="text"/></td> </tr> </table>	NDA	CDSE	TA	OTHER	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
NDA	CDSE	TA	OTHER						
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>						

15. Please answer in Yes / No

a) Have you ever been involved in any criminal case? <input type="text"/> <input type="text"/> <input type="text"/>	d) Is any case pending against you in any Court? <input type="text"/> <input type="text"/> <input type="text"/>
b) Have you ever been arrested/ prosecuted? <input type="text"/> <input type="text"/> <input type="text"/>	e) Is any case pending against you in any Police Station? <input type="text"/> <input type="text"/> <input type="text"/>
c) Have you ever been convicted by any court? <input type="text"/> <input type="text"/> <input type="text"/>	f) Have you been debarred from appearing at any Examination by Union Public Service Commission/ Government of India/ State Government/ University/ Board or any other Educational Institution? <input type="text"/> <input type="text"/> <input type="text"/>

g) If the answer to any of the above mentioned question is 'yes' give full details of the case/ duration of arrest / detention / conviction / nature of case pending / punishment awarded etc and reason being debarred by Centre or State Service Commission / University / Educational Authority etc at the time of filling up of this form Copy of Court orders if any may also be enclosed.

**Note:** Para 13 is applicable for Ex-Service officers only.

16. DECLARATION

(a) I hereby declare that information provided by me in this application form is true and correct to the best of my knowledge and belief and I state that I am a :-  
 (i) Citizen of India.  
 (ii) Subject of Nepal and certificate of eligibility is / is not necessary in my case.  
**Strike out the clause not applicable.**

(b) I understand that any medical examination conducted at any stage of the Selection procedure does not necessarily mean that I have been selected.

(c) I undertake to inform the Director General, Territorial Army, Army HQ, New Delhi immediately in the event of there being any change in my employment during the period of my candidature for Territorial Army Commission and thereafter during my service to the Commanding Officer of my unit / superior officer, together with the No Objection Certificate (NOC) from my employer.

(d) In the event of my selection for commission in the Territorial Army, I am willing to serve anywhere in India whenever required for any duration or as per the rules and orders in force from time to time.

(e) I clearly understand that if at any time during the period of probation I am not found suitable, I shall have to resign my commission in accordance with the rules and orders in force from time to time and in case I decline to do so I am liable to be discharged / removed from the Territorial Army.

(f) I am fully aware that if it is found at any stage that I have knowingly furnished any particulars which is / are false or have suppressed material information or I fail to comply with the above undertakings, my candidature will be rejected summarily and if already commissioned, I shall be liable to be discharged / removed from the Territorial Army.

(g) I further declare that:-  
 (i) I am unmarried.  
 (ii) I am married  
 (iii) I am widower/divorcee.  
**Strike out the portions not applicable.**

(h) I certify that I have read the complete instructions regarding filling of this application form and the application form has been filled accordingly.

Date : .....

Signature of Candidate
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## APPLICATION FORM FOR COMMISSION IN THE TERRITORIAL ARMY

**(TO BE COMPLETED BY THE CANDIDATE IN HIS OWN HANDWRITING IN BLOCK CAPITAL LETTERS BY BLUE / BLACK BALL PEN)**

**Warning : Concealment of any information or furnishing of false particulars will result in the cancellation of the candidature and may also debar a candidate from applying for any type of commission for a period of atleast one year**

**Please read the instructions carefully before filling this application form**

1. Certify you have read the instructions for filling this application form <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>															Self attested recent coloured Photograph of the candidate size 4.5 x 3.5 cm (To be pasted)																																
Answer in Yes or No																																															
2. (a) Candidate's Name	First Name											Signature of Candidate																																			
	Middle Name																																														
	Surname																																														
As given in Matriculation Certificate, in case of variation in name attach Gazette Notification.																																															
b) Have you applied Earlier for PIB for TA Commission (Yes/ No) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																																															
c) If yes then please give month and year of last attempt. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																																															
d) If yes then please give the exact name as given in previous application.																																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">First Name</td> <td colspan="10"></td> </tr> <tr> <td>Middle Name</td> <td colspan="10"></td> </tr> <tr> <td>Surname</td> <td colspan="10"></td> </tr> </table>												First Name											Middle Name											Surname													
First Name																																															
Middle Name																																															
Surname																																															
e) Is there any difference in the names in 'a' and 'd' above (Yes / No). <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																																															
f) A difference in the name at 'a' and 'd' above will be explained by giving detailed reasons, if necessary, on a separate sheet of paper attached to the application form with supporting documents otherwise candidature will be cancelled.																																															
3. (a) Father's Name	First Name											(b) Occupation <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> a) Service-01    c) Professional-03 b) Business-02,    d) Others - 04																																			
	Middle Name																																														
Surname																																															
(c) Present Address <small>(if dead state his last address)</small>	House No						Block/Pkt																																								
	Village/Town						Post Office																																								
	Tehsil						District																																								
	State						Pin Code																																								
(d) Mother's Name	First Name											(b) Occupation <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> a) Service-01    c) Professional-03 b) Business-02,    d) Others - 04																																			
	Middle Name																																														
Surname																																															
4. Candidate's Permanent Address	House No						Block/Pkt																																								
	Village/Town						Post Office																																								
	Tehsil						District																																								
	State						Pin Code																																								
5. Candidate's Present Address	House No						Block/Pkt																																								
	Village/Town						Post Office																																								
	Tehsil						District																																								
	State						Pin Code																																								
6. Candidate's Contact Details :																																															
a) Mobile No. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																c) E-mail Address <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																e) Nearest Police Station with Pin code No. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>															
b) Land line No with STD Code <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																d) Adhar Card No. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																f) Nearest Railway Station <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>															

Signature of Candidate

7. (a) Next of Kin <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> Father-01, Mother-02, Husband-03 Wife-04, Son-05, Daughter-06, Other-07				(b) Name of the Next of Kin Name <table border="1" style="width: 100%; height: 20px;"></table>													
(d) Occupation of Next of Kin <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> a) Service-01 c) Professional-03 b) Business-02, d) Others - 04				(c) Contact Details of the Next of Kin Mobile No <table border="1" style="width: 100%; height: 20px;"></table> Land Line No <table border="1" style="width: 100%; height: 20px;"></table> E-mail ID <table border="1" style="width: 100%; height: 20px;"></table>													
(e) Address of Next of Kin	House No			Block/Pkt													
	Village/Town			Post Office													
	Tehsil			District													
	State			Pin Code													
8. (a) Date of Birth (As given in Matriculation Certificate) Documentary evidence must be enclosed <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 15%;">Day</td> <td style="width: 15%;">Month</td> <td style="width: 70%;">Year</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>		Day	Month	Year				(b) Gender <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 50%;">M</td> <td style="width: 50%;">F</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>		M	F			(c) Marital Status : <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> Unmarried - 01 Married (with one living spouse) - 02 Widower - 03 Divorcee - 04 Married (with more than one living spouse) - 05			
Day	Month	Year															
M	F																
(d) Place of Birth <table border="1" style="width: 100%;"> <tr> <td style="width: 15%;">Village/Town</td> <td style="width: 40%;"></td> <td style="width: 45%;">District</td> </tr> <tr> <td>Tehsil</td> <td></td> <td>State</td> </tr> </table>		Village/Town		District	Tehsil		State										
Village/Town		District															
Tehsil		State															
(e) District & State to which you now belong		District			State												
(f) Give below particular of place(s) where you have resided for more than one year during the preceding five years :-																	
Place (including district of residence)		Residential address in full		Period of residence with dates													
9. (a) Educational Qualification : <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> Graduation-01 Post Graduation -02				(b) Educational Stream at Graduation : <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, Others - 06				(c) Educational Stream at Post Graduation : <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <b>Code :</b> Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, MBA- 06, Others - 07									
(d) Name in order with dates of entering and leaving the places of education you have attended in the following table :-																	
Name and Place of Institutions in which educated		Class upto which Studied		Month & Year of Entry	Month & Year of Leaving												
(e) Give particulars of all examination passed commencing with Matriculation or equivalent Examination (enclosed attested copies of certificates) :-																	
Examination Passed (Matriculation and upwards including technical examinations)	Class or Division	Year	Name of the University/ Institute / Board	Subject*													

\*Note:- Cyber qualifications to be clearly mentioned.  
 Contd.....3

Signature of Candidate
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Application No. :   
 (For office use only)

(m) Record of service in Army/ Navy / Air Force / TA / NCC and appointment held with theater of war in which served with dates :-												
Unit	Period	Appointment held	Remarks									
(n) Army/ Navy / Air Force / TA / NCC courses of instruction if any attended with period of attendance and result obtained :-												
Course	Period	Result	Remarks									
14. (a) Number of attempt already made in PIB for commission in TA. <input type="text"/> <input type="text"/>	(b) Number of attempt already made in SSB	(c) (i) Are you an applicant for any other type of commission in the Army, Navy, Air Force (Yes / No) <input type="text"/> <input type="text"/> <input type="text"/>										
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">NDA</td> <td style="width:25%;">CDSE</td> <td style="width:25%;">TA</td> <td style="width:25%;">OTHER</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	NDA	CDSE	TA	OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(ii) If yes give Type of Commission <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
NDA	CDSE	TA	OTHER									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>									
		(iii) Date of Application <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>										
15. Please answer in Yes / No												
(a) Have you ever been involved in any criminal case?	<input type="text"/> <input type="text"/> <input type="text"/>	(d) Is any case pending against you in any Court?	<input type="text"/> <input type="text"/> <input type="text"/>									
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(c) Have you ever been convicted by any court?	<input type="text"/> <input type="text"/> <input type="text"/>	(f) Have you been debarred from appearing at any Examination by Union Public Service Commission/ Government of India/ State Government/ University/ Board or any other Educational Institution?	<input type="text"/> <input type="text"/> <input type="text"/>									
(g) If the answer to any of the above mentioned questions is 'Yes' give full details of the case/ duration of arrest / detention / conviction / nature of case pending / punishment awarded etc and reason being debarred by Centre or State Service Commission / University / Educational Authority etc at the time of filling up of this form. Copy of Court orders if any may also be enclosed.												
16. (a) Have your parents or any other near relative served in the Armed Forces ? (Yes / No) <input type="text"/> <input type="text"/> <input type="text"/>												
(b) If yes give full particulars regarding their name rank and Arm / Service together with your correct relationship with them.												
17. (a) Is any relative / intimately known person serving in any of the selection Centers / Services Selection Board (Yes / No) <input type="text"/> <input type="text"/> <input type="text"/>												
(b) If yes please give particulars.												
18. Details of particulars in respect of attendance at Service Selection Board, Mobile Selection Board or Air force Selection Board Interview :-												
Type of Commission / Course	Place of Interview	Date of Interview	Result	Roll No								

**Note:** Para 13 is applicable for Ex-Service officers only.

Signature of Candidate
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**SECTION 'B' (1)**

(For candidates who are Government/ Semi Government employees)

**(TO BE COMPLETED BY HEAD OF THE OFFICE/ DEPARTMENT/ INDUSTRIAL OR COMMERCIAL ESTABLISHMENT)**

1. I certify that Shri/Smt/Kumari .....s/o/d/o/w/o..... is employed under me as ..... for the last.....years and that his/her character, as far as known to me, is good. He/She is recommended/ is not recommended for the grant of commission in the Territorial Army.

2. It is also certified that Shri/Smt/Kumari .....will be made available for training or embodiment for service in Territorial Army as and when required.

3. It is further certified that Shri/Smt/Kumari .....does not hold and/or is not likely to hold in the foreseeable future a key post in .....(department / organisation) which could affect the minimum essential, functions of the department/ organization. However, in the event of his/her becoming a keyperson subsequently the Additional Director General Territorial Army, New Delhi, shall be requested immediately to release or discharge him/her from the Territorial Army.

Place..... Signature.....  
 Date..... Designation.....  
 Stamp/Seal of Office.....

(Strike out the words not applicable)

**SECTION "B" (2)**

(For candidates who are running independent business)

**CERTIFICATE TO BE RENDERED BY SELF EMPLOYED PERSONNEL  
 (SELF CERTIFIED BY THE CANDIDATE)**

1. I .....s/o/d/o/w/o ..... certify that I possess good moral character to the best of my belief and knowledge.

Place Signature  
 Date Name

2. Sample affidavit on Non-Judicial stamp paper of minimum value duly endorsed by notary.

I ..... s/o/d/o/w/o ..... resident of ..... do hereby solemnly affirm and declare as follows:-

- (a) That I am a resident of above address.
- (b) That I am self employed as .....
- (c) That my annual income from all sources is approximately Rs .....

The above statement is true and correct to the best of my knowledge and belief.

Deponent

Verification :

Verified at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 201\_\_ that the contents of above affidavit are true to my knowledge & belief and nothing has been concealed therein.

Deponent

**SECTION "B" (3)**

(For candidates who are employed in Private Sector)

**CERTIFICATE TO BE RENDERED BY CANDIDATES EMPLOYED IN PRIVATE SECTOR  
 (TO BE AUTHENTICATED BY HEAD OF OFFICE)**

Certified that:-

(a) Any difference between the civil and military pay and allowances of the applicant Name.....s/o/d/o/w/o ..... an employee of this organization, will be paid by us for the period of his/her military duty in the Territorial Army.

(b) On return from military duty in the Territorial Army Shri/Smt/Kumari ..... will be absorbed to the same or equivalent post which he/she would have held, if his/her service in the civil had not been so interrupted and that such military services would count for all benefits in his/her civil job, like seniority for promotion, increments of pay, bonus and provident fund etc. to which he/she would have otherwise been entitled.

Place..... Signature.....  
 Date..... Name.....  
 Designation.....  
 Stamp/Seal of Office.....

Application No. : 

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(For office use only)
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**SECTION "C"**

(To be completed by the President, Preliminary Interview Board)

**RECOMMENDATION OF INTERVIEW BOARD AT COMMAND**

\*Recommended/ Not recommended for a Commission in the Territorial Army

Place.....

Signature.....

Date.....

(Stamp/ Seal of Office)

\*(Strike out whichever is not applicable)

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**SECTION "D"**

(To be completed by the President, Service Selection Board)

Name of candidate.....

Batch No.....

Marks awarded (both in words and figures)

Place.....

Date.....

Signature.....

President  
Services Selection Board  
(Stamp/ Seal of Office)

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**SECTION "E"**

\*Selected/ Not Selected for commission in the Territorial Army

Place.....

Signature.....

Date.....

Director General, Territorial Army  
Army Headquarter  
(Stamp/ Seal of Office)

\*(Strike out whichever is not applicable)