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| **PROFORMA- LEGAL ASSISTANT** | | |
| 1 | Name |  |
| 2 | Date of birth |  |
| 3 | Designation |  |
| 4 | Educational Qualification |  |
| 5 | Whether the qualification required for the post are satisfied. |  |
| 6 | Date of entry into Govt. Service |  |
| 7 | Date of entry in IA&AD |  |
| 8 | Date of Retirement |  |
| 9 | Experience and posts held |  |
| 10 | Proficiency in Computer (Details may be given) |  |
| 11 | Contact details (Phone No and email address) |  |
| 12 | Any other information |  |
|  |  |  |
| The information furnished above are correct to the best of my knowledge. | | |
|  |  |  |
| Date |  |  |
| Place |  | Signature of the Official |