

APPLICATION FORM FOR COMMISSION IN THE TERRITORIAL ARMY

(TO BE COMPLETED BY THE CANDIDATE IN HIS OWN HANDWRITING IN BLOCK CAPITAL LETTERS BY BLUE 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 <input type="text"/> | | | | | | | | | | Self attested recent coloured photograph of the candidate size 4.5 x 3.5 cm (To be pasted) | |
| Answer in Yes or No <input type="text"/> | | | | | | | | | | | |
| 2. a) Candidate's Name | | First Name | | | | | | | | | |
| | | 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) <input type="text"/> | | | | | | | | | | Signature of Candidate | |
| c) If yes then please give month and year of last attempt <input type="text"/> | | | | | | | | | | | |
| d) If yes then please give the exact name as given in previous application | | | | | | | | | | | |
| | | First Name | | | | | | | | | |
| | | Middle Name | | | | | | | | | |
| | | Surname | | | | | | | | | |
| e) Is there any difference in the names in 'a' and 'd' above (Yes / No) <input type="text"/> | | | | | | | | | | | |
| f) A difference in the names 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 <input type="text"/> | |
| | | Middle Name | | | | | | | | a) Service - 01 | |
| | | Surname | | | | | | | | c) Professional - 03 | |
| | | | | | | | | | | b) Business - 02 | |
| | | | | | | | | | | d) Others - 04 | |
| (c) Present Address (If dead state his last address) | | House No | | | | | | | | Block/Pkt | |
| | | Village/Town | | | | | | | | Post Office | |
| | | Tehsil | | | | | | | | District | |
| | | State | | | | | | | | Pin Code | |
| (d) Mother's Name | | | | | | | | | | | |
| 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. | | | | | c) E-mail Address | | | | | e) Nearest Police Station with Pincode No. | |
| <input type="text"/> | | | | | <input type="text"/> | | | | | <input type="text"/> | |
| b) Land Line No. with STD Code | | | | | d) Adhar Card No. | | | | | f) Nearest Railway Station | |
| <input type="text"/> | | | | | <input type="text"/> | | | | | <input type="text"/> | |

Signature of Candidate

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| <p>7. (a) Next of Kin <input type="text"/></p> <p>Code : Father - 01, Mother - 02, Wife - 03, Son - 04, Daughter - 05, Others - 06</p> | <p>(b) Name of the Next of Kin</p> <p>Name <input type="text"/></p> <p>(c) Contact Details of the Next of Kin</p> <p>Mobile No. <input type="text"/></p> <p>Land Line No. <input type="text"/></p> <p>E mail-ID <input type="text"/></p> |
|---|--|

(d) Occupation of Next of Kin; **Code :** a) Service - 01, b) Business - 02, c) Professional - 03, d) Others - 04

| | | | | |
|----------------------------|--------------|----------------------|-------------|----------------------|
| (e) Address of Next of Kin | House No | <input type="text"/> | Block/Pkt | <input type="text"/> |
| | Village/Town | <input type="text"/> | Post Office | <input type="text"/> |
| | Tehsil | <input type="text"/> | District | <input type="text"/> |
| | State | <input type="text"/> | Pin Code | <input type="text"/> |

| 8. (a) Date of Birth (As given in Matriculation Certificate) Documentary evidence must be enclosed | (b) Gender | (c) Marital Status <input type="text"/> | | | | | | | | | | |
|--|----------------------|---|------|----------------------|----------------------|----------------------|--|---|---|----------------------|----------------------|--|
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Day</th> <th>Month</th> <th>Year</th> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table> | Day | Month | Year | <input type="text"/> | <input type="text"/> | <input type="text"/> | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>M</th> <th>F</th> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table> | M | F | <input type="text"/> | <input type="text"/> | <p>Code : Unmarried – 01 Married (with one living wife) – 02 Widower – 03 Divorcee – 04 Married (with more than one living wife) – 05</p> |
| Day | Month | Year | | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | | | | | | | |
| M | F | | | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | | | | | | | | | | | |

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|--------------------|--------------|----------------------|----------|----------------------|
| (d) Place of Birth | Village/Town | <input type="text"/> | District | <input type="text"/> |
| | Tehsil | <input type="text"/> | State | <input type="text"/> |

(e) District & State to which you now belong

(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 |
|---|-----------------------------|--------------------------------|
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| 9. (a) Educational Qualification <input type="text"/> | (b) Educational Stream at Graduation <input type="text"/> | (c) Educational Stream at Post Graduation <input type="text"/> |
| <p>Code : Graduation - 01 Post Graduation – 02</p> | <p>Code : Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, Others - 06</p> | <p>Code : Arts - 01, Science - 02, Commerce - 03, Engineering - 04, Medical - 05, MBA - 06, Others - 07</p> |

(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 |
|--|--------------------------|-----------------------|-------------------------|
| | | | |
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(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 |
|---|-------------------|------|--|
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| | | | |

Signature of Candidate

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| (f) State Professional qualifications and practical experience if any | | | | |
| Name of the Institutions | Date of Entry | Date of Leaving | Professional Standard Attained | |
| | | | | |
| | | | | |
| | | | | |
| (g) (a) Are you appearing in any university or technical examination during next six months. (Yes / No) <input type="checkbox"/> <input type="checkbox"/> (b) If yes please give date of such examination <input type="text"/> (c) If yes please give the details of exam <input type="text"/> | | | | |
| 10. (a) Are you gainfully employed Yes / No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | (b) Nature of Employment with code <input type="checkbox"/> <input type="checkbox"/> Code : Central Govt. / Union Territory - 01, State Govt./Semi Govt. - 02, Pvt. Sector - 03, Self Employed - 04 | (c) Annual Income (in Rupees) <input type="text"/> PAN No. <input type="text"/> | | |
| (d) Name of Present Department / Firm <input type="text"/> (e) Address of the Present Dept. / Firm <input type="text"/> | | | | |
| (f) Give full particulars of all previous and present employments (State in full details the nature of employment and responsibility) | | | | |
| Name of employer | Date of joining | Date of leaving with reasons | Nature of employments and appointment held | Salary per month |
| | | | | |
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| 11. (a) Nationality <input type="text"/> | | (b) Citizenship <input type="text"/> | | (c) Religion <input type="text"/> |
| (d) Are you citizen of India by birth and / or by domicile <input type="checkbox"/> <input type="checkbox"/> Code : By Birth - 01, By Birth and domicile - 02, By domicile - 03 | | | (e) If you are not a citizen of India to what place do you claim to belong <input type="text"/> | |
| (f) Is certificate of eligibility for Indian citizenship necessary in your case. (Yes / No) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | (g) If answer to point (f) is yes, do you understand that your final selection will be subject to certificate of eligibility being given in your favour by Government of India. (Yes / No) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| 12. Have you ever served in the Army / Navy / Air Force / Territorial Army or NCC in any capacity. (Yes / No) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | |
| 13. Details of Previous Service in the Armed Forces (please enclosed relevent Gazette Notification and other supporting documents) | | | | |
| (a) Service : <input type="checkbox"/> <input type="checkbox"/> Code : Army - 01, Airforce - 02, Navy - 03, TA - 04 | | (b) Arm / Service <input type="text"/> | | (c) Unit <input type="text"/> |
| (d) Sevice No. <input type="text"/> | | (e) Date of Joining <input type="text"/> | | (f) Date of Commission <input type="text"/> |
| (g) Date of Retirement/Release <input type="text"/> | | (h) Substantive Rank held <input type="text"/> | | (j) Medical Categorie at the time of retirement /release <input type="text"/> |
| (k) Pay Account No. <input type="text"/> | | (l) Reasons for Discharge / release from services <input type="checkbox"/> <input type="checkbox"/> Code : Released - 01 Medical invalidated - 02 Premature Retirement - 03 Superannuation - 04 Removed / Dismissed - 05 Resigned - 06 Others - 07 | | |

Signature of Candidate

| | | | | | | | | | | | | |
|---|---|--|----------------------|----------|--------|----------------------|----------------------|----------------------|----------------------|--|--|--|
| (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 | | | | | | | | | |
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| (n) Army / Navy / Air Force / TA / NCC courses of instruction if any attended with period of attendance and result obtained | | | | | | | | | | | | |
| Course | Period | Result | Remarks | | | | | | | | | |
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| | | | | | | | | | | | | |
| 14. (a) Number of attempt already made in PIB for commission in TA <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"/> | | | | | | | | | | |
| | <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%;">Others</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 | Others | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | (ii) If yes give type of commission <input type="text"/> | | |
| NDA | CDSE | TA | Others | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | | | | | | |
| | | (iii) Date of application <input type="text"/> | | | | | | | | | | |
| 15. Choice of written exam centre <input type="text"/> | | | | | | | | | | | | |
| Code : Chandigarh - 01, Lucknow - 02, Patna - 03, Kolkata - 04, Shilong - 05, Pune - 06, Bangaluru - 07, Jaipur - 08, Hyderabad - 09, Udhampur - 10, Srinagar - 11 | | | | | | | | | | | | |
| 16. Please answer in Yes / No | | d) Is any case pending against you in any Court ? | <input type="text"/> | | | | | | | | | |
| a) Have you ever been involved in any criminal case ? | <input type="text"/> | e) Is any case pending against you in any Police Station ? | <input type="text"/> | | | | | | | | | |
| b) Have you ever been arrested / prosecuted ? | <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"/> | | | | | | | | | |
| c) Have you ever been convicted by any court ? | <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. | | | | | | | | | | | | |
| 17. (a) Has your your fathers or any other near relative served in the Armed Forces ? (Yes / No) <input type="text"/> | | 18. (a) Have your any relative / intimately known person serving in any of the Selection Centers / Services Selection Board. (Yes / No) <input type="text"/> | | | | | | | | | | |
| (b) If yes give full particulars regarding his name, rank and Arm / Service together with your correct relationship with him. | | (b) If yes please give particulars | | | | | | | | | | |
| 19. 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. | | | | | | | | |
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Signature of Candidate

28. DECLARATION BY THE CANDIDATES

- (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.
 - iii) Person from area which now form part of Pakistan / Bangladesh and a certificate of eligibility is / is not necessary in my case.
 - iv) Person of Indian origin who has immigrated from Pakistan / Bangladesh, Burma, Sri Lanka, East African Countries of Kenya, Uganda and United Republic of Tanzania with the intension permanently seteling in India.

Strike out the clause not applicable.

- (b) I also certify that I shall attend Preliminary Interview Board and Service Selection Board on my free will and at my own risk and that I or my legal heirs shall NOT claim any compensation or other relief from the Government of India in respect of any injury which may be sustained by me in the course of or as a result of any of the tests given to me at the said Interview / Selection Board due to any reason.
- (c) I understand that my selection at Service Selection Board and Medical Examination conducted does not necessarily mean that I have been selected for grant of commission.
- (d) I undertake to inform the additional 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 TA commission and thereafter during my service to the CO of my unit / superior officer, together with the NOC from my employer.
- (e) 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.
- (f) 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.
- (g) 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.
- (h) I further declare that
- i) I am unmarried
 - ii) I am a widower / divorcee
 - ii) I am married and have more than one wife living
 - iv) I am married and do not have more than one wife living and that I undertake not to contract another marriage without obtaining the prior permission of the Government of India, Ministry of Defence through proper channel.

Strike out the portions not applicable.

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

Place :

Date :

| |
|------------------------|
| Signature of Candidate |
|------------------------|