

## APPLICATION FORM FOR COMMISSION IN THE TERRITORIAL ARMY

**Warning : Concealment of any information or furnishing of false particulars will result in the cancellation of the candidature**

**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;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																									
Answer in Yes or No																																			
2. Candidate's Name	First Name																																		
	Middle Name																																		
	Surname																																		
As given in Matriculation Certificate, in case of variation in name attach Gazette Notification																																			
3. Father's Name	First Name																																		
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4. Candidate's Permanent Address	House No					Block/Pkt																													
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6. Candidate's Contact Details :																																			
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7. (a) Next of Kin <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					(b) Name of the Next of Kin																														
<b>Code :</b> Father-01, Mother-02, Husband-03 Wife-04, Son-05, Daughter-06, Other-07			Name																																
			(c) Contact Details of the Next of Kin																																
			Mobile No																																
			Land Line No																																
			E-mail ID																																
8. (a) Date of Birth (As given in Matriculation Certificate)			(b) Gender			(c) Marital Status :																													
<table border="1" style="width: 100%;"><tr><th>Day</th><th>Month</th><th>Year</th></tr><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>			Day	Month	Year				<table border="1" style="width: 100%;"><tr><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">F</td></tr></table>			M	F	<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																																		
9. (a) Educational Qualification : <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					(b) Educational Stream at Graduation : <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					(c) Educational Stream at Post Graduation : <table border="1" style="display: inline-table;"><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>Code :</b> Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, Others - 06			<b>Code :</b> Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, MBA- 06, Others - 07																													
10. (a) Are you gainfully employed Yes / No <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					(b) Nature of Employment with Code : <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					(c) Annual Income (in Rupees) <table border="1" style="width: 100%;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table> PAN No. <table border="1" style="width: 100%;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>																									
			<b>Code :</b> Central Govt/ Union Territory - 01, State Govt/ Semi Govt -02, Pvt Sector - 03, Self Employed - 04																																
(d) Name of Department / Firm :																																			
(e) Address of the Dept/ Firm :																																			

Self attested recent coloured Photograph of the candidate size 4.5 x 3.5 cm (To be pasted)

Signature of Candidate

Signature of Candidate

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"/>	(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"/>								
12. Have you ever served in the Army/ Navy/ Air Force / Territorial Army or NCC in any capacity (Yes / No) : <input type="text"/> <input type="text"/> <input type="text"/>										
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>NDA</td> <td>CDSE</td> <td>TA</td> <td>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"/>
NDA	CDSE	TA	OTHER							
<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

## 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**

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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="12"></td> </tr> <tr> <td>Middle Name</td> <td colspan="12"></td> </tr> <tr> <td>Surname</td> <td colspan="12"></td> </tr> </table>													First Name													Middle Name													Surname												
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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																																							
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(c) Present Address <small>(if dead state his last address)</small>	House No						Block/Pkt																																												
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	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																																							
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Signature of Candidate

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Tehsil		District																															
State		Pin Code																															
<p>8. (a) <b>Date of Birth</b> (As given in Matriculation Certificate)  <small>Documentary evidence must be enclosed</small></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Day</td> <td style="width: 20%;">Month</td> <td style="width: 60%;">Year</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 40px; height: 20px;"></td> </tr> </table>	Day	Month	Year				<p>(b) <b>Gender</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">M</td> <td style="width: 50%; text-align: center;">F</td> </tr> <tr> <td style="width: 50px; height: 20px;"></td> <td style="width: 50px; height: 20px;"></td> </tr> </table>	M	F			<p>(c) <b>Marital Status :</b> <table border="1" style="display: inline-table; vertical-align: middle; margin-left: 10px;"> <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</p>																					
Day	Month	Year																															
M	F																																
<p>(d) <b>Place of Birth</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Village/Town</td> <td style="width: 50%;"></td> <td style="width: 25%;">District</td> <td style="width: 20%;"></td> </tr> <tr> <td>Tehsil</td> <td></td> <td>State</td> <td></td> </tr> </table>	Village/Town		District		Tehsil		State		<p>(e) <b>District &amp; State to which you now belong</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">District</td> <td style="width: 70%;"></td> </tr> <tr> <td>State</td> <td></td> </tr> </table>	District		State																					
Village/Town		District																															
Tehsil		State																															
District																																	
State																																	
<p>(f) Give below particular of place(s) where you have resided for more than one year during the preceding five years :-</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Place (including district of residence)</th> <th style="width: 40%;">Residential address in full</th> <th style="width: 30%;">Period of residence with dates</th> </tr> </thead> <tbody> <tr><td style="height: 25px;"></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td></tr> </tbody> </table>				Place (including district of residence)	Residential address in full	Period of residence with dates																											
Place (including district of residence)	Residential address in full	Period of residence with dates																															
<p>9. (a) <b>Educational Qualification :</b> <table border="1" style="display: inline-table; vertical-align: middle; margin-left: 10px;"> <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</p>			<p>(b) <b>Educational Stream at Graduation :</b> <table border="1" style="display: inline-table; vertical-align: middle; margin-left: 10px;"> <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</p>			<p>(c) <b>Educational Stream at Post Graduation :</b> <table border="1" style="display: inline-table; vertical-align: middle; margin-left: 10px;"> <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</p>																											
<p>(d) <b>Name in order with dates of entering and leaving the places of education you have attended in the following table :-</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Name and Place of Institutions in which educated</th> <th style="width: 20%;">Class upto which Studied</th> <th style="width: 20%;">Month &amp; Year of Entry</th> <th style="width: 20%;">Month &amp; Year of Leaving</th> </tr> </thead> <tbody> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> </tbody> </table>				Name and Place of Institutions in which educated	Class upto which Studied	Month & Year of Entry	Month & Year of Leaving																										
Name and Place of Institutions in which educated	Class upto which Studied	Month & Year of Entry	Month & Year of Leaving																														
<p>(e) <b>Give particulars of all examination passed commencing with Matriculation or equivalent Examination (enclosed attested copies of certificates) :-</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Examination Passed (Matriculation and upwards including technical examinations)</th> <th style="width: 10%;">Class or Division</th> <th style="width: 10%;">Year</th> <th style="width: 30%;">Name of the University/ Institute / Board</th> <th style="width: 20%;">Subject*</th> </tr> </thead> <tbody> <tr><td style="height: 25px;"></td><td></td><td></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td><td></td><td></td></tr> <tr><td style="height: 25px;"></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>				Examination Passed (Matriculation and upwards including technical examinations)	Class or Division	Year	Name of the University/ Institute / Board	Subject*																									
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

<b>(f) State Professional Qualification and Practical Experience if any :-</b>				
Name of the Institutions	Date of Entry	Date of Leaving	Professional Standard Attained	
<b>(g) (i) Are you appearing in any university or technical examination during next six months. (Yes / No) <input type="text"/> <input type="text"/> <input type="text"/></b>				
<b>(ii) If yes please give date of such examination <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></b>				
<b>(iii) If yes please give the details of examination <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"/> <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"/> <input type="text"/></b>				
<b>10. (a) Are you gainfully employed</b>		<b>(b) Nature of Employment with Code : <input type="text"/> <input type="text"/></b>		<b>(c) Annual Income (in Rupees)</b>
Yes / No <input type="text"/> <input type="text"/>		<b>Code :</b> Central Govt/ Union Territory - 01, State Govt/ Semi Govt -02, Pvt Sector - 03, Self Employed - 04		<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"/> <input type="text"/>
PAN 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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
<b>(d) Name of Department / Firm :</b> <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
<b>(e) Address of the Dept/ Firm :</b> <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
<b>(f) Give full particulars of all previous and present employments (State in full details the nature of employment and responsibility)</b>				
Name of Employer		Date of Joining	Date of Leaving with Reasons	Nature of Employments and Appointment held
<b>11. (a) Nationality</b>		<b>(b) Citizenship</b>		<b>(c) Religion</b>
<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"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>(d) Are you citizen of India by birth and /or by domicile</b>			<b>(e) If you are not a citizen of India to what place do you claim to belong</b>	
<b>Code :</b> By Birth-01, By Birth and Domicile-02, By Domicile - 03			<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
<b>(f) Is certificate of eligibility for Indian citizenship necessary in your case (Yes / No)</b>			<b>(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)</b>	
<input type="text"/> <input type="text"/> <input type="text"/>			<input type="text"/> <input type="text"/> <input type="text"/>	
<b>12. Have you ever served in the Army/ Navy/ Air Force / Territorial Army or NCC in any capacity (Yes / No) :</b> <input type="text"/> <input type="text"/> <input type="text"/>				
<b>13. Details of Service in the Armed Forces (please enclosed relevant Gazette Notification and other supporting documents)</b>				
<b>(a) Service :</b> <input type="text"/> <input type="text"/>		<b>(b) Arm / Service</b>		<b>(c) Unit</b>
<b>Code :</b> Army - 01, Air Force - 02, Navy - 03, TA - 04, NCC - 05		<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"/> <input type="text"/> <input type="text"/>
<b>(d) Service No</b>		<b>(e) Date of Enrolment</b>		<b>(f) Date of Commission</b>
<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"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>(g) Date of Retirement / Release</b>		<b>(h) Substantive Rank held</b>		<b>(j) Medical Categories at the time of retirement / release</b>
<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"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>(k) Reasons for Discharge / release from service :</b> <input type="text"/> <input type="text"/>			<b>(l) Pay Account No.</b>	
<b>Code :</b> Released - 01, Medical invalidated - 02, Premature Retirement - 03, Superannuation - 04, Removed/ Dismissed - 05, Resigned - 06, Others - 07			<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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Signature of Candidate

Application No. :   
 (For office use only)

<b>(m) Record of service in Army/ Navy / Air Force / TA / NCC and appointment held with theater of war in which served with dates :-</b>												
<b>Unit</b>	<b>Period</b>	<b>Appointment held</b>	<b>Remarks</b>									
<b>(n) Army/ Navy / Air Force / TA / NCC courses of instruction if any attended with period of attendance and result obtained :-</b>												
<b>Course</b>	<b>Period</b>	<b>Result</b>	<b>Remarks</b>									
<b>14. (a) Number of attempt already made in PIB for commission in TA.</b> <input type="text"/> <input type="text"/>	<b>(b) Number of attempt already made in SSB</b> <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"/>	<b>(c) (i) Are you an applicant for any other type of commission in the Army, Navy, Air Force (Yes / No)</b> <input type="text"/> <input type="text"/> <input type="text"/> <b>(ii) If yes give Type of Commission</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <b>(iii) Date of Application</b> <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"/> <input type="text"/>		
NDA	CDSE	TA	OTHER									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>									
<b>15. Please answer in Yes / No</b>												
<b>(a) Have you ever been involved in any criminal case?</b> <input type="text"/> <input type="text"/> <input type="text"/>		<b>(d) Is any case pending against you in any Court?</b> <input type="text"/> <input type="text"/> <input type="text"/>										
<b>(b) Have you ever been arrested/ prosecuted?</b> <input type="text"/> <input type="text"/> <input type="text"/>		<b>(e) Is any case pending against you in any Police Station?</b> <input type="text"/> <input type="text"/> <input type="text"/>										
<b>(c) Have you ever been convicted by any court?</b> <input type="text"/> <input type="text"/> <input type="text"/>		<b>(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?</b> <input type="text"/> <input type="text"/> <input type="text"/>										
<b>(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.</b>												
<b>16. (a) Have your parents or any other near relative served in the Armed Forces ? (Yes / No)</b> <input type="text"/> <input type="text"/> <input type="text"/>												
<b>(b) If yes give full particulars regarding their name rank and Arm / Service together with your correct relationship with them.</b>												
<b>17. (a) Is any relative / intimately known person serving in any of the selection Centers / Services Selection Board (Yes / No)</b> <input type="text"/> <input type="text"/> <input type="text"/>												
<b>(b) If yes please give particulars.</b>												
<b>18. Details of particulars in respect of attendance at Service Selection Board, Mobile Selection Board or Air force Selection Board Interview :-</b>												
<b>Type of Commission / Course</b>	<b>Place of Interview</b>	<b>Date of Interview</b>	<b>Result</b>	<b>Roll No</b>								

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

Signature of Candidate
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19. Are you Ex-Civilian Gazetted Officer. (Yes / No) 

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 Enclose Gazetted Notification or Certificated copy Discharge Certificate.

20. Are you under debt ? 

--	--	--

 If so, state amount of debt (in Rupees) 

--	--	--	--	--	--	--	--	--

21. Are you under any liability to repay any loan / advance (Yes / No) 

--	--	--

 If Yes enclose relevant documents with complete details.

22. Details of NCC certificate A/ B / C passed (Yes / No) 

--	--	--

23. (a) Have you ever been in the past to the Indian Military Academy, Dehradun or to an Officers Training School or any other Training Establishment with a view to be trained for an eventual grant of Commission in the Army, Navy or Air Force. (Yes / No). 

--	--	--

(b) If yes, give all particulars regarding your resignation / removal / withdrawl from the training in the table shown below :-

Course No	Date of Joining Course	Cadet No	Date of resignation / Removal / Withdrawal	Reason of resignation / removal / withdrawal copy of discharge certificate is to be submitted

**Warning :** The concealment of this information will result in the cancelation of the candidature and may also debar a candidate either permanently or for specified period from applying all type of commission in the Armed Forces.

24. Give a list of documents enclosed as per Para 11 of the Instructions to Candidates. In the absence of requisite certificates, the application will NOT be considered.


25. Name and Address of two references for verification of facts as above

(a) Name of 1 <sup>st</sup> reference	First Name																		
	Middle Name																		
	Surname																		
Address of 1 <sup>st</sup> reference	House No																		
	Village/Town																		
	Tehsil																		
	State																		
(b) Name of 2 <sup>nd</sup> reference	First Name																		
	Middle Name																		
	Surname																		
Address of 2 <sup>nd</sup> reference	House No																		
	Village/Town																		
	Tehsil																		
	State																		

Signature of Candidate

**26. DECLARATION BY THE CANDIDATE**

(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.

Place : .....

Dated : .....

Signature of Candidate

Witness	First Name															
	Middle Name															
	Surname															
Present Address	House No							Block/Pkt								
	Village/Town							Post Office								
	Tehsil							District								
	State							Pin Code								

Place : .....

Dated : .....

Signature of Witness



**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)

---

**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)