

(To be sent in duplicate)

FOOD SAFETY AND STANDARDS AUTHORITY OF INDIA
Ministry of Health and Family Welfare
Government of India
FDA Bhawan, Kotla Road,
New Delhi – 110 002

FINAL PUBLIC ANALYST EXAMINATION 2013 (OLD SYLLABUS)*

FORM OF APPLICATION FOR ADMISSION TO THE EXAMINATION

APPLICATION FORM

(Last date for submission of duly filled Application Form: 30th November, 2013)

(a) (A) Name of the Candidate (in Block Letters):
Dr./Shri/Smt./Km. _____

(in Hindi) _____

(B) Father's /Husband's Name (in Block Letters):
Shri _____

(in Hindi) _____

Affix recent passport
size photograph

The Photograph duly
attested by
Gazetted Officer

(b) Correspondence address: _____
(with Pin Code)

E-mail ID: _____

Mobile Phone No: _____

(c) Date and Place of Birth: _____

(d) Are you a citizen of India

(a) By Birth:

(b) By Domicile

(e) Name of State to which you Belong: _____

(f) Permanent Address: _____

- (g) Academic Qualification (commencing with degree examination)
(Attested copies to be enclosed)

Examination Passed	Year of Passing	College/University	Main Subject Taken	Division/Class and Percentage

- (h) Particulars of Employment:

Name of the Employer	Post held	Date of Joining	Date of Leaving	Salary and Grade pay

(Note: Attach Certificate of Experience in analysis of Foods from Head of Laboratory)

- (I) **Particulars of examination fee:

(a) Amount: Rs. 500/- (b) Demand Draft No. _____ Date: _____

(c) Payable at: _____ (bank)

- (J) 1. Details of the examination in past:

Previous Registration No.(s) & Result (s) :
(Attach copy of last result (s))

2. Name of papers to re-appear:

(K) Copies of Degree/Diplomas/Exp. Certificate (Send attested copy only)

(i) _____ (ii) _____

(iii) _____ (iv) _____

(v) _____ (vi) _____

It is certified that above information is correct and I have read the information sheet for the candidates carefully and fulfill the above qualifications.

Date: _____

Candidate's signature in full

-For Government Employees/officials only

(To be filled up by the Head of Office of the Candidate)

It is certified that the particulars mentioned above are true to the best of my knowledge.

Date: _____

(Signature of the Head of Office)
With seal

*No fresh candidates are permitted (only for repeaters repeating ≤ 2 papers, practical's, viva-voce)

To be paid by Demand Draft drawn in favor of **Senior Accounts Officer, FSSAI payable at **New Delhi**.

Note: All the documents submitted to be attested by Gazette Officer.