

**APPLICATION FORM FOR COMMISSION IN THE TERRITORIAL ARMY
THROUGH ASB (ARMY HEADQUARTERS SELECTION BOARD)**

**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 Answer in Yes or No <input type="text"/>											
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										
	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.				c) E-mail Address				e) Nearest Police Station with Pin code No.			
b) Land line No with STD Code				d) Adhar Card No.				f) Nearest Railway Station			
7. (a) Next of Kin <input type="text"/>		(b) Name of the Next of Kin									
Code : 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 : <input type="text"/>					
Day Month Year				M F		Code: Unmarried - 01 Married (with one living spouse) - 02 Widows - 03 Widower - 04 Divorcee - 05 Married (with more than one living spouse) - 06					
9. (a) Educational Qualification : <input type="text"/>			(b) Educational Stream at Graduation : <input type="text"/>			(c) Educational Stream at Post Graduation: <input type="text"/>					
Code : Graduation-01 Post Graduation -02			Code: Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, Others - 06			Code: Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, MBA- 06, Others - 07					
10. (a) Are you gainfully employed Yes / No <input type="text"/>			(b) Nature of Employment with Code: <input type="text"/>			(c) Annual Income (in Rupees)					
			Code : Central Govt/ Union Territory - 01, State Govt/ Semi Govt - 02, Pvt Sector - 03, Self Employed - 04			PAN No. <input type="text"/>					
(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

11. Details of Service in the Armed Forces		
(a) Service : <input type="text"/> Code : Army - 01, Air Force - 02, Navy - 03, TA - 04, NCC - 05	(b) Arm / Service <input type="text"/>	(c) Unit <input type="text"/>
(d) Service No <input type="text"/>	(e) Date of Enrolment <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 Categories at the time of retirement / release <input type="text"/>
(k) Reasons for Discharge / release from service : <input type="text"/> Code : Released – 01, Medical invalidated – 02, Premature Retirement – 03, Superannuation – 04, Removed/ Dismissed – 05, Resigned – 06, Others – 07		
12. Please answer in Yes / No		
a) Have you ever been involved in any criminal case ? <input type="text"/>	d) Is any case pending against you in any Court ? <input type="text"/>	
b) Have you ever been arrested/ prosecuted ? <input type="text"/>	e) Is any case pending against you in any Police Station ? <input type="text"/>	
c) Have you ever been convicted by any court ? <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"/>	
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.		
13. 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.		
(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 I may suffer 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 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 No Objection Certificate (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 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 certify that I have filled the application form after reading all the instructions.		

Date :

Signature of Candidate

Application No. :

7. (a) Next of Kin <input type="text"/> Code : Father-01, Mother-02, Husband-03 Wife-04, Son-05, Daughter-06, Other-07		(b) Name of the Next of Kin Name <input type="text"/>													
(d) Occupation of Next of Kin <input type="text"/> Code : a) Service-01 c) Professional-03 b) Business-02, d) Others - 04		(c) Contact Details of the Next of Kin Mobile No <input type="text"/> Land Line No <input type="text"/> E-mail ID <input type="text"/>													
(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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Day</td> <td style="width:10%;">Month</td> <td style="width:10%;">Year</td> </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"/>	(b) Gender <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">M</td> <td style="width:50%;">F</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>		M	F	<input type="text"/>	<input type="text"/>	(c) Marital Status : <input type="text"/> Code : Unmarried - 01 Married (with one living spouse) - 02 Widower - 03 Divorcee - 04 Married (with more than one living spouse) - 05	
Day	Month	Year													
<input type="text"/>	<input type="text"/>	<input type="text"/>													
M	F														
<input type="text"/>	<input type="text"/>														
(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		District	<input type="text"/>	State	<input type="text"/>										
(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											
<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"/>											
9. (a) Educational Qualification : <input type="text"/> Code : Graduation-01 Post Graduation -02		(b) Educational Stream at Graduation : <input type="text"/> Code : Arts - 01, Science - 02, Commerce - 03 Engineering - 04, Medical - 05, Others - 06		(c) Educational Stream at Post Graduation : <input type="text"/> Code : 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											
<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"/>											
(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												
<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"/>												

Signature of Candidate

Application No. : IAF (TA) - 9 (Revised)
Part - 2 Page No 3

(f) State Professional Qualification and Practical Experience if any :-				
Name of the Institutions	Date of Entry	Date of Leaving	Professional Standard Attained	
(g) (i) Are you appearing in any university or technical examination during next six months. (Yes / No) <input type="text"/>				
(ii) If yes please give date of such examination <input type="text"/>				
(iii) If yes please give the details of examination <input type="text"/>				
10. (a) Are you gainfully employed Yes / No <input type="text"/>	(b) Nature of Employment with Code : <input type="text"/> 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 Department / Firm :	<input type="text"/>			
(e) Address of the 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
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="text"/> 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="text"/>	(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="text"/>			
12. Have you ever served in the Army/ Navy/ Air Force / Territorial Army or NCC in any capacity (Yes / No) : <input type="text"/>				
13. Details of Service in the Armed Forces (please enclosed relevant Gazette Notification and other supporting documents)				
(a) Service : <input type="text"/> Code : Army - 01, Air Force - 02, Navy - 03, TA - 04, NCC - 05	(b) Arm / Service <input type="text"/>	(c) Unit <input type="text"/>		
(d) Service No <input type="text"/>	(e) Date of Enrolment <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 Categories at the time of retirement / release <input type="text"/>		
(k) Reasons for Discharge / release from service : <input type="text"/> Code : Released - 01, Medical invalidated - 02, Premature Retirement - 03, Superannuation - 04, Removed/ Dismissed - 05, Resigned - 06, Others - 07	(l) Pay Account No. <input type="text"/>			

Signature of Candidate

Application No. :

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SECTION 'B' (1)
(For candidates who are employed)

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

1. I certify that Shri/Smt/Kumaris/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/is not recommended for the grant of commission in the Territorial Army.

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

3. It is further certified that Shri/Smt/Kumaridoes 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. Is/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.....

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)

SECTION "E"

*Selected/ Not Selected for commission in the Territorial Army

Place.....

Signature.....

Date.....

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

*(Strike out whichever is not applicable)