Note: Please ensure that no column is left blank; but you may not fill up the column which does not concern you.

MAHARASHTRA PUBLIC SERVICE COMMISSION PROFORMA FOR BIODATA

FOR O	FFICE	USE	ON	ILY	Ind	lex No.	·			
1. File No	2. I	Date o	of En	npaneln						
3 Degree/Diploma/Subject					Code	:				
4. Specialisation					Cod	de:				
Super/Sub Specialisation:						de:				
, (-)	o a	re to l	oe fil	lled in b						
6.Please Tick (\checkmark) on Appropriate Box :	Ĺ	Shr	ri	Smt.	K	umari	Pro	of.	Dr.	
7.Full Name Surname								1		Т
					<u> </u>				<u> </u>	
First Name										
Father's / Husband's Name										
8.Date of Birth:	MM			YYYY						
9.Gender : Male Fema	le									
10. Please indicate whether serving und Organization/University/any other In Undertaking or Self employed :			/t. O		ation	Centra	al or S	tate	Govt	<u>.</u>
11. Present Designation, if serving :	-									
12. Name of your Office/Organisation/ Institute/University :	-									_
13. Last Designation and the name of th if retired from service :	e last	Orga	nisa	ation,						
14. Date / month /year of										
Retirement from service :										
15.Particulars of employment/assignment taken after retirement from service, if										
									_	

16.	CSS/IFS/IPS/IRS/and other s Service or any other service autonomous organisation u	Service to which you belong/belonged e.g. IAS/ IA&AS/ services under Government of India or State Civil e under a state Government or service under any other nder the stateGovernment/Government of India/Private
17.	Scale of Pay : (If retired, indicate the scale	e of pay at the time of retirement or the last pay drawn)
18.	Present basic Pay : (If still in service)	
19.	If self employed please indic	ate
	average monthly income :	
20.	Office Address :	
	(If still in service including	
	employment after retiremen	t)
		Dist State
		PIN CODE
21.	Last Office Address :	
	(If retired and not employed in any capacity)	
	in any oupdony,	
		Dist State
		PIN CODE
22.	Postal Address :	
	(If residential address is the	
	•	ate so)
	(Please note that the MPSC send all the correspondence	
	to you at this address)	
		PIN CODE
23.	Telephone No(s) with STD C	codes: Office:
	(Strike out if you do not	Residence:
	have Fax No. or Email)	Mobile :
		Fax No. Residence: Email:
24	Academio/Duefeesianal Ca	
24.		valification starting with First Degree or Equivalent : lar with a doctorate in any subject, the first degree will be
Sr	DEGREE/	NAME OF THE SUBJECT:MAJ

Sr. No.	DEGREE/ DIPLOMA	YEAR	NAME OF THE UNIVERSITY/INSTITUTION	SUBJECT:MAJOR/ SUBSIDIARY
1				
2				
3				

Sr. No.	DEGREE/ DIPLOMA	YEAR	NAME OF THE UNIVERSITY/INSTITUTION	SUBJECT:MAJOR/ SUBSIDIARY
4				
5				
6				
7				
8				
9				
10				

25. Field of specialisation: (To be filled in on the basis of Academic Qualifications and Job/ Service Experience only)

(Please see the bottom of this page before filling it up)

Sr.No.	MAIN FIELD	SPECIALISATION	SUPER-SPECIALISATION

Illustration:

" maon anom		
MAIN FIELD OF STUDY	SPECIALISATION	SUPER-SPECIALISATION
MEDICAL SCIENCES	SURGERY	THORACIC SURGERY
MANAGEMENT	PERSONNEL MGT.	INDUSTRIAL RELATIONS
LAW	INTERNATIONAL LAW	LAW OF THE SEAS

26. Jobs/Positions held during the last 15 years including Current/Last position held (Please state chronologically starting with the job/position held 15 years ago)

Sr. No.	Name of the Office/ Organization	Designation	Year From To	Job Description
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Sr. No.	Name of the Office/ Organization	Designation	Year From To	Job Description
11				
12				
13				
14				
15				
	ation:-			
	Field		Sub Field	Nature of Job
	Surgery		paedic Surgery	Teaching
	Surgery		oracic Surgery	Applied Side
	Management		nel Management	Research
	Civil Engineering		nnical Engineering	Applied Side
	Law		ome Tax Law	Applied Side
ote:	Chemistry		tical Chemistry	R&D ch is treated as experience on t
JIE.	"Applied side".	neid Other tridit	Toaching and Neseal	on is treated as experience on t
27	7.1 Nos. of Indeper Research Pape recognized Jou 7.2 Total No. of Stu Doctoral/Post D	rs Published in rnals : udents guided fo		
27 27 27 8. If y	Research Pape recognized Jour.2 Total No. of Stu Doctoral/Post D. Total No. of suc successfully co	rs Published in rnals : Idents guided fo Doctoral Research Students who ompleted Research ce on the Applie	r h:have ch:d Side(Other than Teac	
27 27 27 8. If y	Research Pape recognized Jour.2 Total No. of Stu Doctoral/Post D. 7.3 Total No. of suc successfully coyou claim Experience.	rs Published in rnals : Idents guided fo Doctoral Research Students who ompleted Research ce on the Applie	r h:have ch:d Side(Other than Teac	
27 27 8. If y ac	Research Pape recognized Jour. 7.2 Total No. of Student Doctoral/Post Evanuation of Successfully consuccessfully consuccessful	rs Published in Irnals : Idents guided for Doctoral Research Students who ompleted Research ce on the Applier formed/being portion of th	r h:have ch:d Side(Other than Teacerformed by you:	
27 27 8. If y	Research Pape recognized Jour. 7.2 Total No. of Student Doctoral/Post Evanuation of Successfully consuccessfully consuccessful	rs Published in Irnals : Idents guided for Doctoral Research Students who ompleted Research ce on the Applier formed/being portion of th	r h:have ch: d Side(Other than Teacerformed by you:	
27 27 8. If y ac	Research Pape recognized Jour 7.2 Total No. of Student Post Doctoral/Post Doctoral/Pos	rs Published in Irnals :	r h:have ch: d Side(Other than Teacerformed by you:	ching), Please give a brief
27 27 8. If y ac	Research Pape recognized Jour 7.2 Total No. of Student Post Doctoral/Post Doctoral/Pos	rs Published in Irnals :	r h:have ch: d Side(Other than Teacerformed by you:	ching), Please give a brief

Note: In the Level of knowledge Column, indicate Excellent/Good/ Fair.

30. Brief particulars of experience in years as an Expert for Examination Bodies : (Please see the bottom of this page before filling it up).

	Please see the botto	ווו טו נוו	is paye be	eiore min	g it up). Level			
Sr N0.	Experience	S.S.C.	H.S.S.C.	Diploma	Degree	P. G.	Competitive Examinations	Others
30.1	For Conventional / Descriptive Examinations					G.	Examinations	
30.1.1	As a Paper Setter							
	Subject							
	Medium of Language							
	No. of Years							
30.1.2	As a Examiner							
	Subject							
	Medium of Language							
	No. of Years							
30.1.3	As a Moderator							
	Subject							
	Medium of Language							
	No. of Years							
30.1.4	As a Chief Moderator							
	Subject							
	Medium of Language							
	No. of Years							
30.2	For Objective Examinations							
30.2.1	For Question Setting							
	Subject							
	Medium of Language							
	No. of Years							
30.2.2	For Review of Questions							
	Subject							
	Medium of Language							
	No. of Years							
30.2.3	As a Paper Setter							
	Subject							
	Medium of Language							
	No. of Years							

31.Cu	rrent Membership of Professional Bodie	es, if any :
	National Level	International Level
32.Aw	vards won, if any (Indicate Year):	
	National Awards	International Awards
	ve you ever-faced any Vigilance Enquiry ureau of Investigation or any other Inves	or enquiry by anti-corruption bureau/Central stigative Organisation :
PI	ease write YES or NO	:
		s of the Vigilance Enquiry and outcome ssed by the competent authority may be
04.4		state to the UDOO
34. AI	ny other information you may like to furi	nish to the UPSC :
	-	
		······
	DECLA	RATION
	DECLARE THAT THE ENTRIES MADE IN THE COLUMNS (NOWLEDGE AND NOTHING HAS BEEN EITHER CONCE	OF THIS PROFORMA ARE CORRECT AND TRUE TO THE BEST ALED OR MISREPRESENTED BY ME.
Place:		
Date :		SIGNATURE
	CERTII	FICATE
Certified	I that, the information given by Shri / Smt./ Kum./ Prof.	/ Doctor
is corre		gh morality, integrity and devotion to the confidential work of

Signature of Competent Authority with Seal *

^{*} If Retired please obtain Certificate from the Competent Authority at the time of retirement #########