**Annex I**

**Application Form**

To:

**Director (HR),**

**Unique Identification Authority of India (UIDAI),**

**Regional Office, 6th Floor,**

**East Block, Swarna Jayanthi Complex,**

**Beside Matrivanam, Ameerpet Hyderabad-500038, Telangana**

Subject: Application for appointment to the post referred to in UIDAI circular no. \_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_, dated\_\_\_ July 2025.

Sir/Madam,

I hereby apply for the post(s) in UIDAI, for which applications have been invited by UIDAI *vide* its circular no*.\_\_\_\_\_/\_\_\_\_,* dated\_\_\_\_ July 2025, and furnish details as under:

* + 1. *Post and location applied for (in order of preference)*:

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| S. no. | Post | Location |
| 1.1 | Senior Accounts Officer | Unique Identification Authority of India (UIDAI), Regional Office, Hyderabad |

* + 1. *Basic details*:

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| 2.1 | Name of applicant:  (in BLOCK letters) | | | |  | | | | | | | | | Recent passport size photograph  (to be pasted) | | |
| 2.2 | Gender: | | | | Male | Female | | | | Third gender | | | |
| Tick as applicable: | | | |  |  | | | |  | | | |
| 2.3 | Date of birth: | | | |  |  | |  | |  |  | | |  |  |  |
| D | D | | M | | M | Y | | | Y | Y | Y |
| 2.4 | Date of superannuation: | | | |  |  | |  | |  |  | | |  |  |  |
| D | D | | M | | M | Y | | | Y | Y | Y |
| 2.5 | Contact details: | | | | (a) Correspondence address: | | | | |  | | | | | | |
| (b) Mobile number: | | | | |  | | | | | | |
| 1. Email:   (in BLOCK letters) | | | | |  | | | | | | |
| 2.6 | Education qualification (graduation/diploma level and above): | | | | | | | | | | | | | | | |
| Qualification (degree, diploma, certificate etc.) | | Year | Name of university, institution or other qualification-awarding body | | | | | Percentage of marks /Grade Point Average | | | | Discipline / branch / specialisation | | | |
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| 2.7 | If applicant is a member of an organised service, full name of the service: |  | | | | | | | | | | | | | | |
| 2.8 | Details of employment:  (in reverse chronological order, for preceding 10 years; enclose a separate self-authenticated sheet, if required) | | | | | | | | | | | | | | | |
| Organisation | | Position held | | Period  (month and year) | | | | | Scale of pay | | Brief description of nature of duties | | | | |
| From | | To | | |
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| 2.9 | Present post held on: | | Regular basis | | | | Deputation basis | | | | | | | | | |
| Tick as applicable: | |  | | | |  | | | | | | | | | |
| 2.10 | If present post is held on regular basis, name of the post, details of the same: | | (a) Level/scale of pay: | | | |  | | | | | | | | | |
| (b) Date of appointment: | | | |  | | | | | | | | | |
| 2.11 | If present employment is on deputation basis, details of the same: | | (a) Date of appointment: | | | |  | | | | | | | | | |
| (b) Approved period of deputation: | | | |  | | | | | | | | | |
| (c ) Parent Organisation : | | | |  | | | | | | | | | |
| 2.12 | Training/courses attended: | |  | | | | | | | | | | | | | |
| 2.13 | Details of awards, honours, appreciation etc.: | |  | | | | | | | | | | | | | |
| 2.14 | Details of application forwarding authority: | | (a) Name: | |  | | | | | | | | | | | |
| (b) Full designation: | |  | | | | | | | | | | | |
| I Full office address: | |  | | | | | | | | | | | |
| (d) Office telephone number: | |  | | | | | | | | | | | |

* + 1. *Details regarding eligibility for post(s)applied for (see part 1 of this form):*

*i. For post(s) listed at serial number(s) 1.1: Senior Accounts Officer*

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| Eligibility criteria | Details regarding meeting of the eligibility criteria |
| *Essential:*  i) Officers from the Central Governmentholding analogous posts on regular basis in the parent cadre/department, |  |
| *or*  with two years of regular service in the Pay Matrix Level 9 of the 7th Central Pay Commission (₹ 53,100 - ₹ 1,67,800) |  |
| *or*  with five years of regular service in the Pay ₹ Matrix Level 8 of the 7th Central Pay Commission (₹ 47,600 - ₹ 1,51,100) |  |
| *or*  with six years of regular service in the Pay Matrix Level 7 of the 7th Central Pay Commission (₹ 44,900 – ₹ 1,42,400) |  |
| *or*  Officers from State/ UT Government/Public Sector Undertaking (PSU) or Autonomous Organisation, holding regular post in corresponding grades with requisite experience. |  |
| (ii) Professional qualifications of Chartered Accountant / Cost Accountant / MBA (Finance) |  |
| *or*  Having passed SAS / equivalent examination of organized Accounts Cadre of Central / State Government |  |
| *or*  Having successfully completed Cash & Accounts Training organized by ISTM |  |
| *Desirable:*  Experience of work in Finance / Accounts / Budgeting etc. |  |
| Additional information, if any, in support of the applicant’s suitability for the post:  (attach separate sheet, if required) |  |

Date:

Place:

Signature of applicant

Certified that the service particulars given by the applicant above have been verified from his/her service records and found to be correct.

Signature with stamp of office of the forwarding authority

**Annex II**

**Certificate from forwarding authority**

**(on the letter head of the organisation)**

No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Dr/Mr/Ms \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, if selected for appointment on deputation in the Unique Authority of India, will be relieved for a period of \_\_\_\_\_\_\_\_\_\_\_1years.
2. The information furnished by the said officer has been checked against his/her service records and is correct.
3. Integrity of the officer is certified.
4. No vigilance case is either pending or being contemplated against the officer.
5. It is certified that no penalty has been imposed on the officer during the last10 years.

*Or*

The details of penalties imposed on the officer during the last 10 years are given in the duly signed and stamped enclosed statement.2

1. Photocopies of ACRs/APARs for the last five years are enclosed herewith, duly attested on each page by an officer not below the rank of Under Secretary to the Government of India or an officer of equivalent rank.

Encls.: as above

|  |
| --- |
| Signature |
| Name: |
| Designation: |
| Telephone: |
| Email: |

[Stamp of office]

Date:\_\_\_\_\_\_\_\_\_\_\_\_

Place:\_\_\_\_\_\_\_\_\_\_\_\_

**1 Period for which the officer shall be relieved should not be less than three years. In respect of officers borne on any cadre of services or posts of the Central Government or a State Government, this confirmation regarding the relieving of the applicant officer in the event he/she of she is selected should be made only with the requisite approval or no objection or “cadre clearance” from the relevant cadre controlling authority. In case no authority is specified as such in respect of the parent organisation, such authority as is competent to approve the relieving of the officer on deputation is to be considered as the cadre controlling authority for the purposes of this circular.**

**2 Please strike out whichever is not applicable.**