

ANNEXURE - I**Application for Consultant in ATM Discipline for**

_____ (Please Specify Location)

Recent self-
attested
Photograph

(i) **Name** : _____

(ii) **Date of Birth** : _____

(iii) **Date of Retirement** : _____

(iv) **Designated Post on** : _____

Retirement

(v) **Address for** : _____

Correspondence

(vi) **Contact No. Landline** : _____

Mobile : _____

(vii) **Email ID** : _____

(viii) **Academic Qualification (In reverse order, starting from the latest): (please enclose relevant documents)**

Sl No.	Degree	Year		Stream/ Subjects	University	Class / Division (if any)
		From	To			

(ix) **Relevant Experience: (please enclose relevant documents)**

- a. Year-wise tasks / highlights of similar nature carried out during relevant experience period with all details including employer, position held & pay-scale.

Sl. No.	Organization	Post Held with Basic Pay	Year		Total period of Experience	Responsibility Handled
			From	To		

- b. Last Payslip to be enclosed along with the application form.

(x) I hereby certify that no known vigilance and disciplinary case was pending against me at the time of retirement.

Place: _____

Signature: _____

Date: _____

Name: _____

Disclaimer:

The above information furnished by the applicant are true and correct. Any discrepancy reported at later date may lead to cessation of work agreement / contract.

Undertaking

I, here by acknowledge that I have read all the clauses of notification and accept the same.

I, hereby agree to consider my application as Consultant in ATM Discipline (Level E7/E6) if found suitable by the Selection Committee of AAI based on my eligibility.

I, hereby submit my willingness to be engaged at Consultant in ATM Discipline (Level E7/E6) as decided by AAI, if selected.

Place: _____

Signature: _____

Date: _____

Name: _____

ANNEXURE - III

CONSENT FORM

(to be filled two months prior to separation)

I, Smt./Sh. _____ working as _____

(Designation and Level) at _____ (Station/Place of Posting) is

superannuating on _____ (Date).

I do hereby give my consent that I am willing to work as Consultant with AAI after my

superannuation w.e.f. _____ (Date from when the employee is willing to take

up consultancy with AAI).

Signature: _____

Date: _____

Place: _____

To,

RED-SR,
Airports Authority of India,
Regional Headquarters, Southern Region.
Operational Offices Complex, Meenambakkam,
Chennai- 600027