

C. SERVICE PARTICULARS

Sl.No.	RANK	DATE OF APPOINTMENT									
		D	D	M	M	Y	Y	Y	Y		
1	CHAIRMAN			-			-				
2	MEMBER CBDT			-			-				
3	CHIEF COMMISSIONER			-			-				
4	COMMISSIONER			-			-				
5	ADDITIONAL COMMISSIONER			-			-				
6	DEPUTY COMMISSIONER			-			-				
7	ASST COMMISSIONER(Sr.)			-			-				
8	ASST.COMMISSIONER (Jr)			-			-				
9	INCOME TAX OFFICER			-			-				
10	INSPECTOR			-			-				
11	DY. DIR/COMPUTER MGR			-			-				
12	ASST. DIR/SYSTEM ANALYST			-			-				
13	PROGRAMMER GR A			-			-				
14	PROGRAMMER GR B			-			-				
15	DATA PROCESSING ASST. GR B			-			-				
16	DATA PROCESSING ASST. GR A			-			-				
17	DATA ENTRY OPERATOR GR D			-			-				
18	DATA ENTRY OPERATOR GR C			-			-				
19	DATA ENTRY OPERATOR GR B			-			-				
20	DATA ENTRY OPERATOR GR A			-			-				
21	DEPUTY DIRECTOR (OL)			-			-				
22	ASST. DIRECTOR (OL)			-			-				
23	HINDI TRANSLATOR			-			-				

C. SERVICE PARTICULARS

Sl.No.	RANK	DATE OF APPOINTMENT									
		D	D	M	M	Y	Y	Y	Y		
24	CHIEF STATISTICAL ADVISOR			-			-				
25	DY. CHIEF STATISTICAL ADV.			-			-				
26	ASST. CHIEF STATISTICAL ADV.			-			-				
27	SAMPLING OFFICER			-			-				
28	ADDL. ASSTT. DIR.			-			-				
29	SUPERINTENDENT			-			-				
30	ASSISTANT			-			-				
31	SUPERVISOR (GR I)			-			-				
32	SUPERVISOR (GR 2)			-			-				
33	HEAD CLERK			-			-				
34	TAX ASST.			-			-				
35	UDC			-			-				
36	LDC			-			-				
37	NOTICE SERVER			-			-				
38	SR. PERSONNEL ASSTT.			-			-				
39	STENOGRAPHER, GR-1			-			-				
40	STENOGRAPHER, GR.-2			-			-				
41	STENOGRAPHER, GR.-3			-			-				
42	STAFF CAR DRIVER GR -1			-			-				
43	STAFF CAR DRIVER GR -2			-			-				
44	STAFF CAR DRIVER GR -3			-			-				
45	JAMADAR			-			-				
46	MULTI TASKING STAFF			-			-				

D. EDUCATIONAL PARTICULARS

SL. NO.	QUALIFICATION	YEAR	(To be filled by Degree/Diploma holders only) SUBJECTS (MENTION MAIN 3 SUBJECTS)	SPECIALISED SUBJECT (MENTION ONLY ONE)
1				
2				
3				
4				
5				

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED

E(a) TRAINING PARTICULARS (INDIA)

SL NO	1.NAME OF THE TRAINING / COURSE	2.NAME OF THE INSTITUTION	YEAR	DURATION	
			(YYYY)	WEEKS	DAYS
1	1				
	2				
2	1				
	2				
3	1				
	2				
4	1				
	2				
5	1				
	2				
6	1				
	2				
7	1				
	2				

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED.

E(b) TRAINING PARTICULARS (ABROAD)

SL NO	1.NAME OF THE TRAINING / COURSE	YEAR (YYYY)	DURATION	
			WEEKS	DAYS
1	1			
	2			
2	1			
	2			
3	1			
	2			
4	1			
	2			
5	1			
	2			
6	1			
	2			
7	1			
	2			

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F(a) EXPERIENCE PARTICULARS BEFORE JOINING INCOME TAX DEPARTMENT

SL. NO.	1. DESIGNATION	2. ORGANISATION	1. PLACE OF POSTING	2. NATURE OF JOB	FROM(F) TO TO(T); WRITE DATES										
					D	D	-	M	M	-	Y	Y	Y	Y	
1	1		1		F			-			-				
	2		2		T			-			-				
2	1		1		F			-			-				
	2		2		T			-			-				
3	1		1		F			-			-				
	2		2		T			-			-				
4	1		1		F			-			-				
	2		2		T			-			-				
5	1		1		F			-			-				
	2		2		T			-			-				
6	1		1		F			-			-				
	2		2		T			-			-				

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED.

F(b) EXPERIENCE PARTICULARS BEFORE JOINING INCOME TAX DEPARTMENT

SL. NO.	1. POST			1. PLACE OF POSTING			FROM(F) TO TO(T); WRITE DATES								
	2. DEPARTMENT	3. NATURE OF JOB		2. CIT CHARGE	3. CCIT CHARGE		D	D	M	M	Y	Y	Y	Y	
1	1														
	2														
	3														
2	1														
	2														
	3														
3	1														
	2														
	3														
4	1														
	2														
	3														
5	1														
	2														
	3														

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