

Note: Please ensure that no column is left blank; Sr. No 1 to 6 is FOR OFFICE USE ONLY, hence do not fill up. Kindly enclose self certified copy of your certificate of competency.

**DIRECTORATE GENERAL OF SHIPPING/
MERCANTILE MARINE DEPARTMENT
MINISTRY OF SHIPPING**

PROFORMA FOR BIO-DATA

FOR OFFICE USE ONLY

1. File No. : _____
2. Date of Empanelment: _____
3. Certificate of Competency No. _____
4. Degree/Diploma/Subject _____
5. Empanelment for following grade of Examination as an external Examiner / member of Academic council as an External member of Inspection team.

6. Approved for Grade of Examination / Specialisation _____

7. a) Full Name (Prof./Dr./Sh./Smt./Km.) : _____
- b) Date of Birth (Illustration: If your date of birth is 3rd September 1940, Please fill it up as 03.09.1940). : _____
- c) Nationality : _____
- d) Gender : Male/Female
8. Please indicate whether serving under Central Govt./State Govt./Autonomous Organisation/University/any other Institution/Pvt.Organisation/Central Or State Govt. Undertaking or Self employed. : _____

9. Present Designation, if serving : _____
10. Name of your office/Organisation/
Institute/University : _____
- a. Last Designation and the name of the last
Organisation, if retired from service : _____
- b. Date/month/year of Retirement
from service : _____
- c. Particulars of employment/assignment
taken after retirement from service,
If any. : _____
- d. Kindly indicate the years of sea Service
and other service under the State
Government / Government of India /
Private Sector/ Self Employed,
separately giving the details of type of
ships sailed and nature of shore
services.
11. Office Address : _____
(If still in service including employment
after retirement) _____
_____ PIN CODE _____
- Last Address : _____
(If retired and not employed
in any capacity)) _____
_____ PIN CODE _____

12. Postal Address : _____
(If residential address is the postal address,
please indicate so) _____
(Note that the DGS/MMD will send all the
correspondence to you at this address) _____

_____ PIN CODE _____

13. Telephone No.(s) Office : _____
(strike out, if you do not
have Fax No.) Residence : _____
Mobile No. : _____
Fax No. : _____
E-mail : _____

14. Academic/Professional Qualification starting with First Degree or Equivalent:
(Example, if you are a scholar with a doctorate in any subject, the first degree will be either B.Tech/BE/BSc. Engg or equivalent)

| DEGREE/DIPLOMA | YEAR | NAME OF UNIVERSITY/ INSTITUTION | SUBJECT : MAJOR / SUBSIDIARY |
|----------------|------|------------------------------------|------------------------------------|
| | | | |

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

| MAIN FIELD | SPECIALISATION | SUPER-SPECIALISATION |
|------------|----------------|----------------------|
| | | |

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

| Name of the Company/ Organisation | Designation | Year From To | Job Description |
|--------------------------------------|-------------|-----------------|-----------------|
| | | | |

17. If you Claim Research Experience, Please indicate:

- i) Nos. of Independent/Co-Authored Research Paper Published in recognized Journals. : _____
- ii) Total No. of Students guided for Extra First class certificate of competency / extra master / Doctoral/Post Doctoral Research, etc. : _____
- iii) Total No. of such Students who have successfully completed Research : _____

If you claim Experience on the Applied Side (Other than Teaching), please give a brief account of duties performed/being performed by you:

18. Languages Proficiency (Including Foreign Languages):

| Language | Level of Knowledge (Excellent/Good/Fair) |
|----------|---|
| | |

19. Current Membership of Professional Bodies and Awards won (If any)

- | | |
|---------------------------------------|----------------------|
| a) National Level | International Level |
| 1. _____ | _____ |
| 2. _____ | _____ |
| a) National Awards (Indicate Year) | International Awards |
| 1. _____ | _____ |
| 2. _____ | _____ |

20. Have you ever-faced any Vigilance Enquiry or enquiry by Anti-corruption Bureau/Central Bureau of Investigation or any other Investigative Organisation.

Please write YES or NO: _____

21. Any other information, you may like to furnish to the DGS/MMD :

(This inter alia may include experience in NGOs/Social organisations or Societies/Institutions/Think Tank etc. whether at National or International level)

DECLARATION

I DECLARE THAT THE ENTRIES MADE IN THE COLUMNS OF THIS PROFORMA ARE CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE AND NOTHING HAS BEEN EITHER CONCEALED OR MISREPRESENTED BY ME.

SIGNATURE

Place:

Date: