

Annexure-I

Application Form for Accreditation – Individual

*Please affix a passport
size photograph*

Functional Area	General Hydrogeology	Mining	Both
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1. Full Name (in Block Letters):	
2. Father's Name:	
3. Mother's Name:	
4. Date of Birth: (mm/dd/yyyy)	
5. Nationality:	
6. Mailing Address:	
Address for correspondence	
PIN	
Police Station	
Email:	
Telephone/Mobile No.	

Permanent Address	

7. Aadhaar No	
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8. Educational Qualification (Bachelor degree onwards):

Sl. No.	Course/Degree	Major subjects	University/Institute	Year of passing	Percentage of marks secured (%)	Division	Self-Attested copies enclose (yes/no)

9. Work Experience

Name of the post	Organisation/Institute	From	to	Nature of work	Date of superannuation (wherever applicable)	Total experience in years	Self-attested copies of documents in support of experience to be enclosed.

Computer skills							
Common office software (MSWord/Excel/PowerPoint)				Yes/No			
GIS software				Yes/No			
Rockworks				Yes/No			
Groundwater modeling software				Yes/No			
Other geoscientific software (please specify)							
1.				Yes/No			
2.				Yes/No			
3.				Yes/No			
Scientific Publications/Reports				(Attach list of publications)			
Additional information, if any							
Declaration							

This is to certify that I, _____, (complete name of applicant), S/o _____ a resident of _____, have no pending _____ (complete address) administrative and/or criminal case before any court/ authorized body. I, further, certify that I have never been found guilty/ convicted of any administrative offense and/or crime. I also certify that all the information given by me is true to the best of my knowledge and belief.

(Signature)

Date

List of documents to be submitted

1.	Filled in application form with photograph pasted on it
2.	Address proof
3.	Proof of date of birth
4.	Self-attested copies of certificates in respect of educational qualification
5.	Self-attested copy of Aadhaar card
6.	Self-attested copies of experience certificate issued by the employer or research supervisor as the case may be.
7.	In case of retired officers, copies of necessary certificates.

Annexure -II

Application Form for Accreditation - Organisation

(Kindly attach separate sheets if necessary, for more information)

Functional Area	General Hydrogeology	Mining	Both
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1.	Name	
2.	Address of the Consultant organization	
	Head Office	
	Branch Office	
3.	Name of the Head of the Organization	
4.	Contact person details	
5.	Name	
6.	Address:	
7.	Tel No. Mobile	
8.	Email	
9.	Legal Status of the organization (please mark (V) the appropriate status)	
10.	Company/Partnership/Proprietorship/Registered/ Society/ Public/Private/Government/ Research/Academic Institute/ Industry Association/ Others (please specify and attach necessary evidence)	
11.	Date of Registration / Incorporation (attach copy of certificate of incorporation/registration)	
12.	Established in Year	

13.	Services provided by the Organization	
14.	Number of Employees	
15.	Total For GWS/RWH / Hydro activities	

Project Coordinator

S. No	Name	Nos of years In-house	CV Attached
			Y / N
			Y / N
			Y / N
			Y / N
			Y / N

Organization's experience in Hydrogeological Report preparation:

S. No	Name of Report	Client Name	Report Type	Period	Completion Certificate from Client

Hydrogeological Reports/ GW studies carried out in last three years - a. Numbers of reports prepared

Enclose a copy of one Hydrogeological Report (soft copy) and list of reports prepared by the organization in the preceding two years from the date of application.

Declaration:

I/We have carefully read all guidelines of Accrediting Institute for accreditation of GW Consultant Organization. The conformity of eligibility of the experts proposed, employment

status of proposed experts to the requirements of the Scheme, has been verified by us at our end. I/We agree to code of conduct terms as given in document.

I/We confirm that the information provided in the application in support of the application is correct to the best of our knowledge and belief.

I/We authorize Accrediting Institute to make any enquiry as deemed fit as part of the reviewing process. I/We understand that in case any information is found to be incorrect, it may result in rejection of this application and/or disqualification. I/We authorize Accrediting Institute to utilize the information provided in this application for legal, research, training, sharing with CGWA/ DoWR/MOEF and IPC members and/or for any other purpose as may be deemed fit for the by Accrediting Institute.

If accredited, I/We commit to notify Accrediting Institute immediately of any changes in the status where information regarding such changes, if declared may affect the consideration for accreditation of the organization.

Signatures

Name (Authorized Signatory)

Designation

Organization

Date