

**ATOMIC ENERGY EDUCATION SOCIETY (REGD.)
ANUSHAKTINAGAR, MUMBAI 400 094**

**APPLICATION FOR PERMISSION FOR ACQUISITION
OF ADDITIONAL QUALIFICATION (AQ)**

PART A: TO BE FILLED IN BY THE APPLICANT

1 Particulars of the employee

- (a) Name : _____
- (b) EMPID : _____
- (c) Designation : _____
- (d) School/College/Office in which Working : _____
- (e) Date of Birth : _____
- (f) Category (SC/ST/OBC/EWS) : _____
- (g) Date of initial appointment : _____
- (h) Comp. Code No. : _____
- (i) Qualification at the time of initial appointment :

Table – A : Qualifications required for the post & Qualifications possessed by the applicant

Sl. No	Post Held (Mention subject also, in case of teaching staff)	Qualifications				
		required for the post	possessed and declared (that he/she possesses) by the applicant at the time of joining AEES	declared by the applicant that he/she has been pursuing at the time of joining AEES	Year of Passing	Percentage of marks

- (j) Additional Qualification acquired if any (prior to the present request) while in service:

Table – B

Educational Qualifications	Name of Institution	Year of Acquiring additional qualification	Percentage of Marks	Ref. No. & Date of permission granted	Whether promoted/ on the basis of acquiring additional qualification	If yes, details of promotion

- (k) Working Experience after acquiring latest Qualification at (j): _____ years

- (l) Nature of present duties: _____

2 Particulars of Additional Qualification for which Permission is sought

(a) Particulars of course / Examination:

Name of the Course	Name of the Institution	Whether the university is recognized for offering programme through Distance Education mode by NCTE/UGC	In case of technical programme whether recognized by AICTE/ NCTE/Min of HRD	Name of the body awarding the AQ	Anticipated month of	
					Enrollment	Completion

- (b) Mode of undertaking the Courses as : External Candidate/
Regular Student
- (c) Date of notification issued by the Institute : _____
- (d) Last date for submission of application (without fine) : _____
- (e) Last date for submission of application (with fine) : _____
- (f) Last date for payment of fee (without fine) : _____
- (g) Last date for payment of fee (with fine) : _____
- (h) Whether Additional Qualification is in the line with the work/ duties : Yes/No
- If yes, give justifications : _____

- (i) If not fully aligned with work profiles, are you ready to get transferred where your expertise is useful within the Society? : Yes/No
- (j) In case, you want to pursue the course by joining as a regular student in evening college give the following particulars:
- (i) No. of days in a week that you have to attend the classes. _____
- (ii) Timing of the classes: _____
- (k) Details of leave (approx.) that will be required in connection with examinations/ contact courses / practical in a year

No. of days.	From	To	No. of Occasions

UNDERTAKING

1. My taking up the above course will not in any way affect the discharge of duties assigned to me. In case the time schedule for any activity connected with the course work coincide with the official duties, I will forego the course work and give first preference to my duties.
2. I hereby confirm that as on date, I have not joined any course for acquisition of Additional Qualification.
3. I shall apply and take admission and complete the course within the approved period immediately in the college/course for which permission is granted. In the event of not getting admission I shall immediately inform the Central Office through Head of School/Jr. College/Section.
4. In the event of not getting admission to the course/college for which permission is granted, I will take separate permission for other college/course as required.
5. I shall withdraw my name from the above course if permission is withdrawn at any time.
6. I am aware that as a result of the grant of permission, if I acquire additional qualification, this does not automatically render me eligible for appearing in promotion/change of duties.
7. The decisions taken by the Society from time to time with respect to Additional Qualification will be binding on me.
8. In case any information furnished above is found incorrect, I will be liable for disciplinary action.

Date: _____

Signature of the employee

PART B: FOR OFFICE USE (SCHOOL/JUNIOR COLLEGE)

I certify that I verified the particulars given by Shri/Smt./Kum./Dr. _____
_____ (designation) _____ given at Part A of this application and compared them with the particulars available in the personal records of the employee available in the school office and the notification given by the institute. I further certify that the above particulars are correct as per records.

The application is received in the office on _____. (Please put the date in DD/MM/YYYY format).

Date: _____

Dealing Assistant's Signature: _____

Dealing Assistant's Name: _____

PART C

RECOMMENDATION OF THE HEAD OF THE SCHOOL/JR. COLLEGE/OFFICE
(Strike off whichever is not applicable)

1. The course of study for which permission has been sought by Shri/Smt./Kum./Dr.
_____ is relevant/not relevant to
her/his work/duties.

2. Recommended that the permission sought may be granted as the studies will not
coincide / adversely affect his/her official duties

OR

Permission sought may not be granted for the reasons given below:

Date:

Signature of Head of AEC School/JC/CO

Name of the Head of AEC School/JC/CO

Chief Administrative Officer
AEES, Mumbai