

**PROFORMA FOR PARTICIPANTS OF CENTRAL/STATE/PRIVATE ENTITIES/INDIVIDUALS  
for the OPCW sponsored events on Chemical Emergencies/Disaster Management**

1. Title of the Training/Seminar/Workshop/Meeting:
2. Full Name of the Applicant:
3. Father's/ Spouse Full Name:
4. Date of Birth:
5. Present Position:
- 6(a). Employer Name:
- 6(b). Employer Complete Address and contact details:
- 6(c). Education Qualifications (list of all degrees/certificates/diplomas):
- 6(d). Professional experience (provide details in chronological order as per the format below):

Sl. No	Position held and Designation	Organisation/Department	Tenure (From - To)	Roles & Responsibilities (briefly)	Area of Expertise	Experience acquired during the posting relevant to this training
1.						
2.						

- 7(a). Whether the applicant has attended the same training earlier, if so the details:
- 7(b). Details of previous foreign trainings/workshops/events attended on OPCW/CWC/CBRN related subjects:

Sl. No	Name of the foreign training/workshop/events	Venue with name of the Country	Duration (From - To)	Organized by	Sponsored by	Experience acquired during the Training/event
1.						
2.						

- 7(c). Number of years of relevant experience (CWC/CBRN):

8. Please state briefly why you are applying for the course, and indicate both what you expect to gain from it and how it would benefit your work, your institution and the country. (not more than 200 words)

9. Please attach your complete biodata/CV in detail. (not more than two A4 size pages)

10(a). Complete Permanent Address of Applicant:

10(b). Address for Correspondence with landmark:

11. Nationality:

12. Please tick-mark the appropriate as per applicability (only for private entities/individuals):

S.NO	Description	Please tick-mark (√) YES/NO			
1.	Has any FIR or NCR been filed against you in any police station?	YES		NO	
2.	If yes, what has been the outcome? (brief)	<input type="text"/>			

3.	Have you ever been kept under detention anywhere?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
4.	Have you ever been prosecuted?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
5.	Have you ever been bound down under Section-7, 11, 16 of CrPC of India?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
6.	Have you ever been fined by a Court of Law?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
7.	Have you ever been convicted by a Court of Law for any offence?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
8.	Have you ever been debarred from any examination or rusticated by any University or any other educational authority/institution?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
9.	Any criminal case pending against you in any court of law at the time of filling up this Attestation Form?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

**13. Declaration:** It is certified that the foregoing information is correct and complete to the best of my knowledge and belief:

Date:   
Place:

**Telephone & Mobile No:**   
**E-mail ID:**

**Name & Signature of the Applicant**

**14. Declaration to be furnished by the Employer\*/ Head of Office/ Forwarding Authority:**

- a. It is certified that the particulars furnished by Shri/Smt.  are correct and he/she possesses required educational qualifications and professional experience cited in the OPCW- TS Note under reference.
- b. It is also certified that :-
  - i. There is no vigilance or disciplinary case pending/contemplated against Shri/Smt.
  - ii. His/ Her integrity is certified and no adverse remarks has come to the notice of this office.

Signature:   
Name & Designation:   
Telephone No:   
Mobile No:   
Email ID:   
Fax No:   
Office Seal:

Place:   
Dated:

**15. Endorsement by the concerned Central/State Government Department/Ministry:**

"I, (Name of the Government Officer), (Full Designation) of the (Department to which the officer belongs to) of the Central/State Government of , on behalf of the Central/State Government of  hereby endorse the nomination of  holding the position/designation of  In the Office/ Division/ Branch of as  indicated in the attached application form, for participation in the (Title of the Training/ Seminar/ Workshop/ Meeting along with relevant dates and venue of the event)."

Signature:   
Name:   
Designation:   
Official seal of the Organization:

Place:   
Dated:

- List of enclosure:
1.
  2.
  3.

(\* Strike out which is not applicable.)

**Instruction: This duly filled Annex-III along with the signed declaration by the applicant and signed and stamped endorsement by Employer/Head of Office/ Forwarding Authority is to be attached in pdf along with all other information/document sought in Annex-III, and uploaded on the OPCW Training Management System Portal on the NACWC's website (<https://training.nacwc.gov.in/>) and also sent by email(s) to ([adviser-nacwc@gov.in](mailto:adviser-nacwc@gov.in)) and ([jd-nacwc@gov.in](mailto:jd-nacwc@gov.in)).**