

PARLIAMENT OF INDIA (To
(RECRUITMENT BRANCH, LOK SABHA SECRETARIAT)

(To be filled in by Recruitment Branch)

APPLICATION FORMAT

Affix recent self-attested passport size Photograph

Name of the Position applied for: **CONSULTANT INTERPRETER** ()
(Please indicate Regional Language)

Signature of candidate

1. FULL NAME (In Capital Letters):

[illegible]

Surname

(Exactly as mentioned in matriculation or equivalent examination certificate. Please leave one box blank between each part of name.)

2. FATHER'S NAME (In Capital Letters): _____

3. MOTHER'S NAME (In Capital Letters): _____

4. NATIONALITY:

5. ADDRESS FOR COMMUNICATION: _____

PIN

Tel./Mobile No(s). _____ e-mail address _____

6. DETAILS OF RESIDENCE DURING LAST 5 YEARS WHERE THE APPLICANT HAS RESIDED FOR MORE THAN ONE YEAR:

ADDRESS	PERIOD OF STAY

7. PERMANENT ADDRESS: _____

PIN

8. DATE OF BIRTH:

(Please enclose self-attested copy of the matriculation/or equivalent examination certificate)

D D M M Y E A R

		100.00			100.00			
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9. AGE AS ON 14.10.2026: Years _____ Months _____ Days _____

10. PLACE OF BIRTH (Village/Town/City/District/State): _____

11.(a) DETAILS OF EDUCATIONAL QUALIFICATIONS (Matriculation onwards):
(Please enclose self-attested copies of the certificates/degrees as well as marks sheets)

Exam Passed (Matriculation onwards)	Institution/ University/ Board	Subjects studied	Duration of study	Year of passing	% of marks

11.(b) DIPLOMA IN THE REGIONAL LANGUAGE(S) CONCERNED, IF ANY –
(Please enclose self-attested copy of the diploma)

Diploma Course	University/ Institution	Subjects studied	Duration of Diploma course	Year of passing	% of marks

11.(c) WHETHER APPLYING ON THE BASIS OF REGIONAL LANGUAGE(S) CONCERNED AS MOTHER TONGUE? [YES ☐ NO ☐] (Please tick as applicable)
(If yes, please enclose an 'Affidavit' on non-judicial stamp paper stating regional language(s) concerned as your mother tongue and duly notarized)

11.(d) DETAILS OF EXPERIENCE IN TRANSLATION OR INTERPRETATION WORK
IN THE REGIONAL LANGUAGE CONCERNED, IF ANY –
[Please enclose self-attested copy of the experience certificate(s)]

Name of the Organisation	Post held	Duration	Nature of duties performed

(Candidates are advised to fill-up the above columns carefully and in terms of conditions stipulated in the Advertisement to avoid rejection)

12.(a) DETAILS OF EMPLOYEE(S) RETIRED FROM THE LOK SABHA AND RAJYA
SABHA SECRETARIATS, CENTRAL/STATE GOVERNMENT(S), STATE
LEGISLATURE SECRETARIATS, AUTONOMOUS BODIES, CENTRAL/STATE
PUBLIC SECTOR UNDERTAKING(S), SUPREME COURT OF INDIA/HIGH
COURTS AND LOCAL BODIES.

Name of the Organisation	Post held	Retired from the service on	Nature of duties performed

(b) SERVICE IN OTHER ORGANISATIONS, IF ANY -

Name of Organisation	Status of Organisation	Nature of duties performed

13. Do you possess the essential educational qualifications as required for the position applied for? YES / NO
14. Do you possess the desirable experience as prescribed for the position applied for? YES / NO
15. Do you possess the desirable qualification? YES / NO

16. **DECLARATION:**

I declare that I fulfil the eligibility conditions as per the advertisement and that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage or not satisfying the eligibility conditions according to the requirements mentioned in the advertisement, my candidature/empowerment/engagement is liable to be cancelled/terminated.

PLACE:

DATE:

(SIGNATURE OF CANDIDATE)

Note: Applications without self-attested copies of necessary certificates/degree/mark sheets/diploma/affidavit as mentioned in column nos. 8, 11(a), 11(b), 11(c) and 11(d) (wherever applicable) and also recent identical photographs at the prescribed spaces in the application form will be summarily rejected.

PARLIAMENT OF INDIA
(RECRUITMENT BRANCH, LOK SABHA SECRETARIAT)

ATTENDANCE SHEET

(To be filled in on a separate sheet by the candidate when submitting Application Form)

1. Advt. No. 1/2026

2. Name of the Position: **CONSULTANT INTERPRETER:** _____
(Please indicate Regional Language)

Affix recent
self-attested
passport size
Photograph

Signature of Candidate

3. NAME (In block letters): _____

4. FATHER'S NAME (In block letters): _____

5. MOTHER'S NAME (In block letters): _____

6. ADDRESS FOR COMMUNICATION: _____

_____ PIN _____

(To be filled in by the candidate at the Examination Venue)

7.

Subject	Date of Exam.	Signature

8.

ROLL NO.	
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(To be allotted by Recruitment Branch)

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