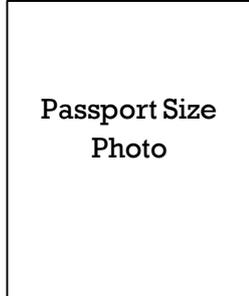


APPLICATION FORM FOR EMPANELMENT IN ESIC
(TO BE FILLED IN BY APPLICANT ADVOCATES)

To.
**The Joint Director I/c.,
Employees State Insurance Corporation,
Sub Regional Office, Panchdeep Bhawan,
P-4, MIDC, Trimbak Road, Satpur,
Nashik-22007**



Name (In Block Letter)	
Father's Name	
Court for which applied (Specify Court wise)	
<u>CHECK LIST</u>	
List of documents attached (Please mark tick)	
Copy of all Certificates & mark-sheets (Graduation onwards.)	
Experience Certificates	
Copy of the Bar Council Registration	
Duly filled Annexure B	
Other (Please specify) :1	
:2	
:3	

PERSONAL DETAILS (In Block Letters)		
1.	Name in full	
2.	Date of Birth	
3.	Nationality	
4.	Address for correspondence with PIN and Phone No.	
5.	Permanent Address with PIN and Phone No.	

6.	Address of office/chamber, if any phone	
7.	Mobile Number(s)	
8.	Email ID	
9.	Is any of your relative an ESI Employee? If so, please give details (viz. Name designation, place of work & relationship with the applicant	

10. Details of Educational qualification:

(Commencing with the Graduation or equivalent. examination)

Examinations passed	Name of the Board/ University	Class or division	% of Marks	Year passing
LLB/Law Graduation				
Post-Graduation				
Other Professional Qualifications				

11. Whether the applicant is currently on the Panel of any other Government Department/PSU/Statutory Body/Autonomous Body etc. and if yes, the details below
(self-certified copy of the Office order/letter of empanelment may be attached)

Name of the Department/PSU/Statutory Body Autonomous Body	From	To

12. Whether the applicant has worked as Legal Researcher (IR) attached to any Court judge? If yes, the details and the supporting documents.

Name of Court Judge	Period of Research	Supporting documents

13. If one or more advocates are associated as juniors of the applicant, their details be provided below.

Sl. No	Name of the Advocates	Enrolment No with date

14. Infrastructural facilities available with the applicant (if available) be provided as below

Office Space	Office clerk	Steno/typist	Support staff

15. No of Cases relating to ESIC handled earlier

Sl. No	Title of case (Documentary proof must be attached)

16. Whether the applicant has been engaged (through Vakalatnama) as counsel in any Land mark case? If yes, the particulars of the case with copy of the judgment wherein his/her name is recorded as advocate for one of the parties (Copy of order Judgment be attached as proof).

Name of the Court	Case Title	Nature of Judgment

17. Whether Income Tax return is being file for last five year" Yes/No, (If yes, please attach copies of ITRs)

18. Details of Bank Account/ PAN Number /Aadhaar Number be provided below;

Bank Account Details (Bank Account Number. Address of the branch and IFSC Code	PAN Number	Aadhaar Number

19. Whether any proceeding has ever been commenced against the applicant advocate or are continuing before the disciplinary committee of the Bar council of alleged professional misconduct.

Sl. No	Details of allegations and proceedings	finding made by the disciplinary committee

20. Whether any criminal case has ever been filed or FIR registered or any criminal proceeding has ever commenced against the applicant advocate:

Sl. No	Details of allegations and proceedings	Finding made by the disciplinary committee

21. Any additional professional qualification(s), which will further the candidature, including membership of professional society, award, and honor etc. may be listed in the box below. (Documentary proofs may be attached)

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UNDERTAKING

1. I hereby confirm and declare that the information furnished in the application and in the attached certificate is true/correct and complete to the best of my knowledge and belief. I have not concealed any relevant information I am fully aware that if any of the information furnished by me is found to be false incorrect, my candidature for the empanelment will be treated as cancelled and matter will be referred to the appropriate authority.

2. I also undertake to maintain absolute secrecy about the cases of the ESIC as required under the Act, Rules and Regulations there under.

3. I also undertake to return all case files and records to the ESIC as and when required by the ESIC.

4. I agree with the fee schedule notified by ESIC.

Place:

Date :

Signature of the Advocate.

Enrolment Number.

Mobile No.