

Affix recent passport size photograph

## Application for the post of Sub Staff in the district of \_\_\_\_\_.

1	Name of the candidate with surname in BLOCK LETTERS	
2	Address for communication	
3	Contact No. (Mobile/Land) / E-mail id	
4	Father's / Husband's name	
5	Employment Exchange / Sainik Board Registration Number and name of the District where it was registered.	
6	Date of Birth & Age	
7	Marital Status	
8	Religion	
9	Educational Qualifications (enclose mark lists for SSC or its equivalent and Intermediate or its equivalent	Total marks in SSC : Total marks in Intermediate/12 <sup>th</sup> :
10	Category (belongs to SC/ST/OBC/PWD/Ex-SM)	
11	Sub-Caste	
12	Place of Domicile	
13	Are you a dependent of Ex- Serviceman killed in action?	

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14	<ul> <li>(a) Do you have any of the following Disability, if so details:</li> <li>i) Blindness / Low Vision (VH)</li> <li>ii) Hearing Impairment (HH)</li> <li>iii) Locomotor Disability (LM or OH)</li> </ul>	
	(b) Percentage of Disability as certified by Medical Board / Medical Authority	

15. Furnish particulars of previous / present Employment

Post Held	Salary Drawn (per month)	Name & address of Organisation	Service		Reasons for leaving
			From	То	leaving

16	Whether any Criminal / Civil action is pending against you in any Court of law in the country, if so, furnish the details in brief.				
17	Have you been convicted at any time?				

The above information given by me is correct to the best of my knowledge and belief. In the event of any information/particulars furnished by me being subsequently found materially incorrect / false or in the event of suppression of any relevant facts, my candidature shall be deemed cancelled.

Date:

Place:

Signature of the candidate

<u>Note</u>:

Attested photocopies of the certificates in support of (1) age, (2) educational qualifications alongwith Transfer Certificate/School Leaving Certificate from the institution last studied, (3) Caste certificate issued by the competent authority (4) Disability certificate (Disability should not be less than 40% in any case) issued by Medical Board/Medical Authority (5) Discharge certificate in case of Ex-Servicemen (6)Proof regarding Place of Domicile (proof of residence/Employment Exchage Registration card) (7)Photo identification card issued by State / Central Government etc., should be enclosed to this Application or else such applications shall not be entertained.