Application Format

Advertisement No									Date	Date			
Name	of the	e pos	t applie	ed fo	or				I .				
1. Full name(in capital)													
Sl. No.	Exam Degr Passe	ree	Year of passing.		Divisio Grade of Mark	%	Duration of the Degree/ Diploma.		Name of Board/ Uni.	Subject	Subject of Specializa	ation.	
10. Any other specialized training/course under taken 11. Details of Employment/Experience in the relevant fields in chronological order:													
S.No.		Office		Po	Post held		Period		Bandade Pay.	+ Nature	of duties.		
 12. Details of enclosures: Attested photocopies of documents in support of the information supplied in above columns such as Educational Qualification, Date of birth, SC/ST/OBC certificate, experience etc. 13. I hereby declare that all the statements made in the application are true and complete to the best of my knowledge and belief. I undertake that action can be taken against me by the Corporation (DTC) for furnishing false information mentioned herein. 													
Date-													
Place-									N	Jame & Sig	gnature of the	e Candidate	