## **FORMAT OF APPLICATION**

	ertisement No.				:									
Position Applied for														
Application Mode [Direct / Deputation]						:								
Details of Demand Draft						:								
DD I	No.	1	DD Da	te			Draw	n on Bank						
1	Name in full (in Block Letters)													
2	Father's/Husb	her's/Husband's Name												
3	Gender & Marital Status												Affix self	
4 Permanent Address including Pin code					:								sted recent	
													sport size	
												pn	otograph	
5 Correspondence address including Pin code												_		
6 Contact details (Phone No. & Email ID)														
o dontact actails (i hone ivo. & Email 15)					•									
7	(a) Date of Birth (Self attested copy for proof of age to be attached)				:	Date		Month		•		Year		
	(b) Age as on last date of receipt of				:	Year		Month	s			Days		
	application													
8	Nationality				:									
9	Religion													
10 (a) State your category :														
	(Gen/SC/ST/OBC/Ex-Serv) (attached certificate)													
	(b) Whether belongs to PwD (Yes/No)				:		If yes, VH/HH/OH							
(If yes, attach self attested copy of certificate)						<u> </u>		With % of disability						
11 Whether Registered with any Council				:	Date	of Reg.	Reg.	No.	Name o		of Cou	of Council		
(If yes, attach copy of certificate)														
12 Educational Qualifications beginning with 10th std. onwards (Attached copies of mark sheet & certificates)													ites)	
Examination Year of Marks details						% of	Div/	Board						
Passed			passing Max Marks marks obtained			narks	Class			College/Institution		Subject Taken		
1 40004		passing			'	nano		01117010	Sity					
			man	3 Obtained										
	10 Drofoo	olonal / Ta		al Ovalitiaati		· / A H = 4	ممام مام		l. abaat 1	0	t\	-		
				al Qualificati		`		•			,			
Examination Passed		Year of		arks details		% of	Div/	Board		College/Institution		tion Subject Taken		
		passing	Max			narks	Class	Univers	sity					
			mark	s obtained										
14	Work Experience	ce (Latest f	irst & p	proof of each	exp	erience	to be a	ittached)						
Name and address of Designation Scale of pay						Period of Service Nature of work an								
	Organisation	& Job		& Grade Pay		From		То	Year	Month		f responsibilities		
		(Regu Contr		/Consolidate	a									
			,											
<u> </u>										1				
15 Professional training undergone, if any, :														
	and details the													
16 Any other relevant information that you														
	may like to fur	nisn												
	reby declare t													
	mation given b													
the e	event of any inf	ormation of	or part	of it being f	OUI	nd false	e or inc	correct or su	ppresse	d before d	or after	the te	st/interview	

information given by me in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect or suppressed before or after the test/interview or during the appointment period, my candidature/appointment shall automatically stands cancelled/repatriated/terminated without any notice or compensation.

Date:-

Place:-