APPLICATION FORM

(Please fill in BLOCK Letter only)

Advertisement No. & Date:

Affix self-

Attested

| Application for the Post of: Photograph | | | | | | | | | | | | | | |
|---|---|--------|---------|--------|----------|------------|------------------------|-------------------|-------------|------------|--|--|--|--|
| Personal Details: | | | | | | | | | | | | | | |
| Name in CAPITAL LETTERS | | | | | | | | | | | | | | |
| Surname | | | | | | First name | | | Middle name | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Father's / Mother's name | | | | | | | Spouse's name | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Nationali | ty | S | State o | of Doi | micile | | | Gender | | | | | | |
| | | | | | | | | | | ransgender | | | | |
| | | | | | | | | | | | | | | |
| | Da | ite of | Birth | | | | Age (as on 01.07.2024) | | | | | | | |
| (DD | / | MM | / \ | YYYY | <u> </u> | | Yrs. Months Days | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Local Address | Local Address / Address for communication | | | | | | | Permanent Address | | | | | | |
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| | | | | | | | | | | | | | | |
| Pin | | | | | | Pin | | | | | | | | |
| Tel. No. / Mobile No. : | | | | | | | | | | | | | | |
| E-mail : | | | | | | | | | | | | | | |
| Home Town | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

| Qualification | College / University / Institution | Name of the Degree | Duration of Degree | Year of Passing | % of Marks / CGPA |
|--------------------------------------|--|--------------------|--------------------|--------------------|----------------------|
| Matriculation (10 th STD) | | | | | |
| Higher Secondary (+2) | | | | | |
| U.G | | | | | |
| P.G | | | | | |
| Other Qualification | | | | | |
| | | | | | |

Details of Educational Qualification (Self attested certificate copies to be enclosed):

Details of Certificates / Documents if any: (Self – attested copies to be enclosed)

| SI. No. | Name of the Certificate | Certificate No. | Date of issue | Duration of course | |
|------------|-------------------------|-----------------|---------------|--------------------|--|
| | | | | | |
| | | | | | |

Work Experience (Self attested certificate copies to be enclosed):

| Name of the Organization / (GOVT./PSU/ PVT/ COURTS) | Post(s) held / Practice | (Mandatory to fill up all columns) | | | | | | Total no. of Years | Scale of pay / Gross | Job Responsibility | |
|--|-------------------------------|------------------------------------|------|----------------|----|----------------|--|--------------------|-------------------------|-----------------------|--|
| | | | From | | То | | | & Months | salary (if employed) | | |
| | | 5) | | DD / MM / YYYY | | DD / MM / YYYY | | YYYY | | | |
| | | | | | | | | | | | |
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Publications, if any:

List of self – attested documents to be attached along with the application form:-

- i. Date of Birth Proof: Copy of Birth Certificate or 10th Certificate
- ii. Copy of Proof of Educational Qualification
- iii. Copy of Experience Certificate (s)
- iv. Other relevant Certificates (if any)
- v. Self-attested Photo ID proof.

Declaration:

I hereby declare that all statements as mentioned in this application are true and correct to the best of my knowledge and belief. I understand that in the event of any particulars or information given above being found false or incorrect, or if at any stage it is found that I do not possess the prescribed qualification / experience for the post, my candidature will be rejected ab-initio. If any shortcoming(s) is / are detected even after appointment, my service may be terminated. I also certify that I am not facing any charge of, nor have ever been convicted for, any act of moral turpitude or economic offence.

| Place: | (Signature) | | | | |
|--------|-----------------------|--|--|--|--|
| | | | | | |
| Date: | NAME IN BLOCK LETTERS | | | | |