Application Form

No.	Exam Passed	Graue	Passing	Board/University	Specialization
Sl.	Exam Passed	Grade	Year of	Doard /University	Enogialization
12.Educational Qualifications:					
11.Marital Status			Married/Unmarried		
10.Whether SC/ST/OBC/General			Caste:		
9.Date of Birth		:			
8.Permanent Address		:			
7.Address for Correspondence with Phone Number & Email ID					
7 Addre	ss for Corresponde	nce ·			
6.Guard	ian Name and Phon	ie No. :			
5.Mothers Name		:			
4.Fathers/Husbands Name		:			
3.Name in Full (block letters)		rs) :			
2.Name of the Project		:			
1.Name of the Post Applied for					

Sl. No.	Exam Passed	Grade	Year of Passing	Board/University	Specialization

13.Work Experience:

SL. No.	Period		Post Held and	Name of the	Reason for
	From	То	Scale of Pay	Employer	Leaving

1. E	1. Employment exchange details (if available): No Exchange						
2. If	2. If selected what period would you require for joining the post:						
3. H	Have you ever been declared unfit by a medical board/courtYes/NoYes/No						
fo	for appointment in any government service? If yes, details						
DECLARATION							
I hereby declare that the particulars furnished in this form by me are true to the best of							
my knowledge and belief.							
Place	:						
Date: Signature of			Signature of the	e Candidate			