

**GOVERNMENT OF ANDHRA PRADESH**  
**(Notification No.07/DM&HO/ATP/2020-21 Dated.17.08.2021)**

**WALK-IN-INTERVIEW FROM 19.08.2021 TO 21.08.2021**  
**AT O/O DM&HO, ANANTHAPURAMU**  
**AT 10.30.AM TO 4.00 P.M**

Affix  
Latest colour  
passport size  
photo with self  
attestation

**APPLICATION FOR THE POST OF \_\_\_\_\_**  
(Mention the Post name as mentioned in the Notification)

1. NAME OF THE  
APPLICANT : (as per  
SSC)

2. FATHER's NAME :

3. DATE OF BIRTH :  
(As per SSC Marks List)

| Date | Month | Year |
|------|-------|------|
|      |       |      |

4. AGE AS ON 01.07.2021 :

| Years | Months | Days |
|-------|--------|------|
|       |        |      |

5. SOCIAL STATUS :  
(Attested copy of latest Caste Certificate  
issued by the Tahsildar concerned)

| SC | ST | BC (with Sub<br>Group) | Others |
|----|----|------------------------|--------|
|    |    |                        |        |

6. Whether belongs to Physically Handicapped : Yes / No  
(If Yes, the latest Certificate issued  
by the  
Medical Board to be  
enclosed)

7. Whether belongs to Ex-Service men :  
Yes / No  
(If yes, necessary certificate should be enclosed)

8. **DETAILS OF SCHOOL EDUCATION :**

| Class | Year of Passing | Name of the School & Place | District |
|-------|-----------------|----------------------------|----------|
| IV    |                 |                            |          |
| V     |                 |                            |          |
| VI    |                 |                            |          |
| VII   |                 |                            |          |
| VIII  |                 |                            |          |
| IX    |                 |                            |          |
| X     |                 |                            |          |

Whether Local Candidate of Ananthapuramu District: YES/NO

**Residential Address :**

**Mobile No. :**

**E-mail ID :**

**9. QUALIFICATIONS :-**

(Attested copies of relevant certificates of qualifying examination, along with Marks Lists to be enclosed)

**(i) ESSENTIAL QUALIFICATION :**

| Name of the Course | Date of passing of the Course | Maximum Marks in the Course | Marks obtained in the Course |
|--------------------|-------------------------------|-----------------------------|------------------------------|
|                    |                               |                             |                              |

(In case of Studied in Abroad please mention marks as prescribed in the Notification and Please mention the Maximum and obtained marks )

**(ii) Service Weightage :**

| Place where worked / working. | Urban / Rural / Tribal | Period of work |    | Total period of experience |        |
|-------------------------------|------------------------|----------------|----|----------------------------|--------|
|                               |                        | From           | To | Years                      | Months |
|                               |                        |                |    |                            |        |

|                             |  |
|-----------------------------|--|
| Registration Number of APMC |  |
|-----------------------------|--|

**DECLARATION**

I, \_\_\_\_\_, S/o / D/o \_\_\_\_\_ solemnly declare that the particulars given above are correct to the best of my knowledge and belief. I also agree that in the event of any of the particulars furnished in my application being found to be incorrect or false at a later date, my appointment will be cancelled summarily.

**SIGNATURE OF THE APPLICANT**