	FORMAT OF A	PPLI	CATION FORM		
1. 2. 3. 4. 5.	Advertisement No. Serial number of the post Post applied for Name of the applicant Date of birth	: : : : :	(Mr./Miss./Mrs.) Date	Month	Year
6.	Father's Name	:			
7.	Address (in full)	:			
8.	E-Mail Id and Phone No.	:			
9.	Aadhar Number (You will be required to show the Original document at the time of the test)	:			
10.	Nationality	:			
10.	Category to which belong (SC/ST/OBC)				
	(Attach photocopy of certificate)	;			
11.	Whether Ex-serviceman (Yes/No)	:			
12.	Academic/technical/professional	:			
	qualifications				
	(Beginning with matriculation level)				

attach photocopies of certificates								
SI No.	Name of Exam.	Year of passing	Univ./Board	Div./Class/Grade	Subjects	%of marks		
				The state of the s				
	n			100				
	* ** *** * **							

13. Experience (attach photocopies of certificates in support of experience):

SI No.	Name of employer/Org.	Period From - To	Designation	Pay Scale/ Pay	Nature of duties	Reasons for leaving
		- 1				

I solemnly declare that the statements made by me in this form are correct to the best of my knowledge and belief.

1	Signature	of	the	candid	late)
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Date: Place:

List of enclosures: