APPLICATION FORM

Application for the Post of								
1.	Name of the	Post Applied fo	or:					
2.	(in Capitals)						aste your recent passport size photograph	
3.	Date of Birt	h:		Ionth Year				
4.	Gender (please tick √): Male Female							
5.	Marital Status:							
6.	Father's/Husband's Name:							
7.	Mailing Address (in block letters):							
	Pin Code:							
	Tel. No.:							
	E.mail ID (if any):							
8.	Nationality:							
9.	Whether Physical Handicapped? (please tick √) : Yes No							
10.	Community (J	please tick √) S	C	ST OBC	GENERAL	Other		
11.	All Educatio	nal/other profess	sional Qua	lifications/Training	g Courses etc/Degre	e Examinatio	on onwards:	
Level	Exam passed/ Degree Trg.	Division/Grade % of Marks	Year of Passing	Duration of the Degree/ Diploma	Board/ University	Subject	Subject of Specialistion	
	50.010			W 1000				

12	Any other relevant Information:			
13.	Details of enclosures:	1)		
		2)		
		3)		
knowle by then	edge and belief. I underst	tatements made in the application are true and complete to the best of my tand that action can be taken against me by the Commission, if I am declared e of misconduct mentioned herein. I have informed my Head Office/Deptt, in his selection.		
Date:		Signature of candidate		
Place:				
· inco.				