

Annexure 1
APPLICATION FORM

1. Name of the post Applied for :
2. Name of Candidate (in Block Letter):
3. Gender :
4. Date of Birth :
5. Mother's Name :
6. Marital Status (Married/Unmarried) :
7. Present Address for correspondence :
8. Permanent Address :
9. Phone Number/Mobile Number :
10. Email Id :

11. Details of Qualification

S.No.	Degree	% of Mark	Year of Passing	Board/University

12. Details of Experiences

S.No.	Designation	Institute/Name of the employer	Period	Reason for leaving

13. Have you ever been declared unfit by a medical board/court for appointment in any government service? (Yes/No)

If yes, details.....

14. If selected, within what period would you require for joining the post:

Declaration

I hereby declare that information given above is true and correct to the best of my knowledge. In the event of any information being found incorrect/false, my candidature/services are liable to be terminated.

Place:

Date:

Signature of Candidate