Prescribed Format

APPLICATION FOR THE POST OF (Indicate one post only)

(Name of Post)

1. Name of the Candidate (To	be filled in Capital	Letters Only)	
			Affix recent passport size
			(4.5 x 3.5 cm)
			photograph self
2. Father's Name:	MATERIAL SERVICES		attested (not older than 06
			months)
3. Date of Birth:			
	D D M M	YYYY	
Permanent Address		(Misorithes rights)	
4. Fernialient Address			
Line 1			
Line 2			
Line 2		Pin Code	
Line 3	T	elephone	
State:			
5. Address for correspondence			
Line 1			
Line 2			
Line 2		in Code	
Line 3		lephone	
State:			
Mobile No			
E-mail ID-			
6. Caste/Category :			
(Please tick(√)			
Appropriate box) UR (attach certificate)	SC ST OBC PWBE		
(attach certificate)		category Domicile	Candidate
7. Aadhaar Details			Dave
(notasangmi dihurit)			
8. If applied under PwBDs:	Disability	% Disability	Scribe required
Category (attach certificate)	(VH/HH/OH/MD)		(Yes/No)

Appropr	iate box)							
10. National	ity:	•••••						
11. Marital S	Status: Single	/Marri	ed/Div	orced/Se	parated	Dirter or		
12. Religion	: : : : : :							
13. Education	onal qualification(M	latricu	lation o	onwards)	attach cert	tificate) :		
Qualification University/Board		rd			otal Marks	Percentage		Div/Class
Chivelety/D			Pass	sing	Secured	of Marks		
							illa to st	10
14. Experier	nce (attach certifica	ate):	M	MI U	712	SOMEONINA	A toeytar	make to
Post held & P	ay Office/	Office/ Period of Se		Service	Total Per			
Scale	Institute	F	rom	То	years & months		Nature of Duties	
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complete and	declare that all correct to the besinderstand and agr	<u>E</u> the si	tateme ny knov	RATION nts made	nd belief. I	have no	ot suppr	essed any
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