

8. CONTACT DETAILS

STD Code : _____ Ph. No _____
Mobile No. _____
Email ID _____

Signature of Candidate

9. CANDIDATE'S PERMANENT ADDRESS:

SAME AS ABOVE

☐

Name :

F/H Name :

Address :

:

City/Town/Village:

Distt:

State :

Pin Code :

10. STATUS OF ACADEMIC QUALIFICATION

Name of Examination passed(from 10th onwards)	Course	Year of Passing	Total Maximum Marks of the course	Total Marks obtained in all group/ years by the	%age of Aggregate marks/ Grade obtained in final year/ final	Institute / university
10th						
12th / intermediate, pre-university						
GRADUATION						
POST GRADUATION						
Other						

11. EXPERIENCE DETAILS (Please indicate post qualification experience only):

POST	NAME OF ORGANIZATION	Nature of duties	Period		Salary (Rs. Per Month)
			From	To	

Note:- Please enclose self-certified qualification certificate, experience certificate, Proof of DOB, Identity Proof along with online application.

DECLARATION

I hereby declare that the above particulars are true in every respect and nothing has been concealed or withheld by me. If any information furnished above is found false at any time, my candidature/appointment may be cancelled without any notice and legal action may be taken accordingly.

ENCLOSURES: (PLEASE TICK (✓) THE ITEMS ATTACHED, IN THE BOX. ATTESTED COPIES OF SERIAL NO.1 TO 8)

1. ☐ CERTIFICATE FOR PROOF OF DATE OF BIRTH
2. ☐ Certificate and MARK SHEET FOR ALL GROUP OF EXAM/YEARS
3. ☐ NOC OF EMPLOYER (IF APPLICABLE)
4. ☐ Work Experience Certificate.
5. ☐ Copy of Aadhar Card and Voter ID

PLACE:

DATE :

CANDIDATE'S SIGNATURE