## **Application Form**

SE	SECTION-A (For office use only)		Receipt No Dated							
Fe	e Deposited : Rs	Mode	of Paym	ent(DD)						
DE	) NoDD Date	lssuing	Bank Nar	ne :		Sig. of Recv.Off	icer			
	N-B (To be filled by candidate) e tick √ wherever required)				Post ap	oplied for :				
	nal Details(Fill in CAPITAL	l etters only)·								
1.	Name of the Candidate:	<del></del>				F	Paste affix recent			
2.	Father's/ Husband's Name	<u> </u>					passport size photograph			
3.	Aadhar Number:									
4.	Date of Birth (DD/MM/YY)	Y): /	/		_					
5.	Sex:	Male (	)	Female (	) 6. Cate	gory :				
6.	Mobile Number :				Alternate Numb	er(if any):				
7.	Nationality:									
8.	Whether physically handic	capped: Yes (	)	No ( )						
9.	Place of birth:				(Giv	ve place of birth with name of Dist	rict and State)			
10.	. Candidate's Mother tongue	e:								
11.	. Name of other language(s	(Separate with a comma	a, if entering m	ore than one)						
	(a) Read									
	(b) Write									
	(c) Speak									
12.	. Phone Number (Land Line	e):			(wit	th STD code)				
13.	. E-mail ID :									
14.	. Address for corresponden	ce:								
15.	. Permanent Address:									
16.	. Details of Educational Qua	alifications (as on d	ate of adv	ertisement						
	Exam Passed	Board/ University Name	Year of passing	Division /Grade	Aggregate % Marks Obt. (upto decimal of two digit)	Subjects	Remarks (Distinction, if any)			
	10 <sup>th</sup>									
	10+2/12 <sup>th</sup>									
•	Graduation*()									

	Exam Passed	Degree/ Diploma Name	Board/ University Nar	Year of passing	/Grade	Aggregate % Marks Obt.	Spe	ecialization	Remarks		
	From To P		Post/Designation			Office Name with tact details etc.			Nature of job		
	in chronological order (s	_	last four employers)								
			atabases	Tools/	pols/Packages		Languages W		Veb Technologies		
(d	Give details of any done after leaving the lames and Office Name	College)	o persons to who	n reference	••	made:	E-mail	M	obile/ Ph. No.		
21. N	done after leaving the lames and Office Name	addresses of two Rank/Designa Department/Of	o persons to who ation with fice Name	n reference Add	could be i	made:					
21. N	done after leaving the lames and Office	Rank/Designa Department/Of	persons to who	n reference Add	could be i	made:					
22. Ti 23. O eby de he ent n is fou have n have demic under	done after leaving the lames and Office Name	Rank/Designate Department/Of D	persons to whomation with fice Name selected:  DE  are true and conforfeit the claim to aw for any offence of misconduct selected: abusing such aur' is purely on conformation of the conf	ect to the bothe post a e. uch as par hority or da ontract bas	could be interest of my not will be ticipating maging an is for 06 r	knowledge and the liable to the discingular of an any building or other months and the	pelief. If a plinary ac y educa er propert aforesai	any part of the ction.	e information ity, whether		
22. Ti 23. O  eby de he ent n is fou have n have demic under lemen shall a	ime needed to joi Other particulars, i eclare that: tries made in this und to be false or not been convicte not indulged in or administrative erstand that the 'erstand that '	Rank/Designate Department/Of D	persons to whomation with fice Name selected:  DE  are true and conforfeit the claim to aw for any offence of misconduct selected: abusing such aur' is purely on conformation of the conf	ect to the bothe post a e. uch as par hority or da ontract bas	could be interest of my not will be made into the made in the made	knowledge and the liable to the discingular of an any building or other months and the	pelief. If a plinary ac y educa er propert aforesai to time.	any part of the ction.  tional author ty. d post do no	e information ity, whether ot carry any		

6.