Application Form

Application No. (For Office Use Only)

PLEASE FILL UP THE APPLICATION IN CAPITAL LETTER IN (Except Signature in CAPITAL LETTER)

PASTE (Do not Pin or Staple here). Paste recent pass port size colour photograph of size 3.5 cm X 3.5 cm. The Colour photograph should not be more than 3 months old.

Signature in CAPITAL LETTER)	1	The Colour photograph should not be more
Advertisement No: 85/P.D./Commr/22-23	<u>Dated:</u> 27/04/2022	than 3 months old.
Application for the post (Put √ tick mark)		Please put your signature across the photograph.
	D (Social Sector)	
☐ Sub-Assistant Engineer (Civil) ☐ Sub-Ass	sistant Engineer (Electrical)
☐ Sub-Assistant Engineer (Mechanical)		
1. Name (In Capital Letter):		
FIRST NAME:		
MIDDLE NAME:		
SURNAME:		
2. Father's / Spouse' Name (In Capital Letter) :		
3) DATE OF BIRTH (DD/MM/YYYY)		
4) Age as on 01.01.2021 Years	Months	
5) Nationality:		
6) Address: 6.1. PERMANENT ADDRESS (In Capital Letter):		
P.O.:		
Town / City:		
District :		
State:		
Pin code:		
6.2. ADDRESS FOR CORRESPONDENCE (In Cap	ital Letter) :	
P.O.:		
Town / City:		
District :		
State:		
Pin code:		

ii. E-	-mail ID :					
3. Ac	eademic Qualification (Madhy	amik or	equivalent ar	nd onwards):		
Sl. No.	School/ Board/ University/ Institute	Degr	ee/ Diploma	Year of passing	Duration	Percentage of marks obtained
. Ad	lditional Qualification (If any)	:				
.0. J	ob Experience ::					
Sl. No	Name of the Office(s) where Post held service rendered		Tenure of service	Job Description	Last scale of	
110	service rendered			Sel vice	Description	Pay
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1 C	Check List of documents: (PLE	FACE TI	CK J IN THE	POV)		1
Sl. No.			CK VIIV IIIE	Y/N	No. of door	umants analosad
		Documents			No. of documents enclosed (Photocopies)	
1.						
2.	Proof of Academic Qualification (of the highest degree)					
3.	Proof of residence (Aadhaar Card/Voter Card/Ration Card)					
4.	Copy of Appointment letter for the last post held					
	Experience certificate from the last Head of Office					
5.	Last Pay Certificate					
5.6.						
6.	pration:					
6. Decla	aration:	na mafully	mond the	anditions of al	iaihility mon	tioned in the
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