|                             |   | Applica                                 | ition Form   |  |                   |                       |  |
|-----------------------------|---|---|--|--|-------------------|-----------------------|--|
| Name of the po              | ost :   | *************************************** |  |  |                   |                       |  |
| GENERAL INFO                | RMETION   |   |  |  |                   |                       |  |
| 1. Full Name of             | Applicant:-   |   | *********  |  |                   |                       |  |
| 2. Date of Birth:           |   | *************************************** | *********  |  |                   |                       |  |
| 3. Religion/Cast            | /Category:  | *************************************** |  |  |                   |                       |  |
| 4. Address for C            |   |   |  |  |                   |                       |  |
| 5. E-Mail ID:-              |   |   |  |  |                   |                       |  |
| 5. Mobile with V            |   |   |  |  |                   |                       |  |
|                             | at the Applicant  |   |  |  |                   |                       |  |
|                             |   |   |  |  |                   |                       |  |
| Educational Q               |   |   |  |  |                   |                       |  |
| Examination                 | Board/University  |   |  |  |                   |                       |  |
| Degree                      | Board/Oniversity  | Institute                               | Subject<br>Specialization  | Year of<br>Passing   | Division<br>/CGPA | Marks                 |  |
|                             |   |   |  |  |                   |                       |  |
| I.S.S.C.                    |   |   |  |  |                   |                       |  |
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| ET/SET                      |   |   |  |  |                   |                       |  |
| perience If any             |   |   |  |  |                   |                       |  |
| niversity/Institution Post  |   | From                                    | From to  |  | Total(in          | Total(in year & month |  |
| niversity/institu           | MANAGEMENT OF THE PARTY OF THE | DATE OF THE PERSON NAMED IN             |  | The State of the S | BOOK BOOK         |                       |  |
| niversity/institu           |   |   |  |  |                   |                       |  |
| niversity/institu           |   |   |  |  |                   |                       |  |

Signature of Applicant

Place:-