File No.NRCM(G)194/2023(Vol.IV)

Application Form

1.	Post	t applied for					Affix	passport
2.	Ful	l Name (in Bl	ock letters)					
3.	Fath	ner's Name						
4.	Gen	der						
5.	Date	e of Birth						
6.	Age	e as on date of	finterview					
7.	Ma	rital Status						
8.	Mobile Number							
9.	E-M	Iail Address						
10.	Correspondence Address(with pin Code)							
11.	Permanent Address							
12.	Category (SC/ST/OBC/General)							
13.	Subject specialization : [🗸]							
14.	S. No	Name of degree	Board/ University	Year of passing	Duration of Course (in Years)	Max. Marks	Marks Obtained	Marks /Percentage OGPA
	1.	Matric						
	2.	Class-XII						
	3.	Graduation (specify)						
	4.	Masters, Specify as applicable						

File No.NRCM(G)194/2023(Vol.IV)

15.	Work experience	ence:										
S. No	Designation	Name Of employer	Name of the office	Period		No. of years/month						
				From	То							
1												
2												
16. Diploma in: Year of passing (% of marks)												
I, hereby declare that the Information given above by me are true to the best of my Knowledge and belief. In the event of any information is being found false, my candidature/ Services, if selected, may be Terminated without any notice. Date:												
	Signature of Applicant :											
	Name of the Candidate :											
List certif 12	ricate/experien	res: Attested ce certificate/ca			ualifica	ntion marksheets/certificates/Birth						
٥												