

APPLICATION FOR THE POST OF JOGANASAHAYAK

NAME OF GP:-

(N.B.:- To be filled in Capital Letters by the candidate himself/herself)

1. Name of the applicant :-
2. Father's/ Husband's Name :-
3. Date of Birth :-
4. Gender (Male or Female) :-
5. Age(As on 31.01`.2020) :-
6. Permanent Address :-

Self Attested
Photograph

7. Present Address :-

8. Residential Proof (Attach copy of residential certificate)

9. Educational Qualification :- (Attach Self Attested copies of Certificate and Mark sheet)

Examination Passed	Year of Passing	Total Marks	Mark Secured	Percentage of Marks
Matric				
+2/Intermediate				
Graduation				

Declaration

I do hereby declare that, the information and data furnished above by me is true and correct to the best of my knowledge and belief. If any misleading or wrong information will be detected at any time, than the candidature will be summarisely rejected.

Full Signature of the Candidate