Pin code:

PASTE (Do not Pin or

Staple here). Paste recent passport size

### **Job Application Form** Please read instructions carefully before filling the application

PLEASE FILL UP THE APPLICATION IN CAPITAL LETTERS IN OWN HANDWRITING

colour photograph of (All information is to be filled up in CAPITAL LETTERS) size 3.5 cm x 3.5 cm. The colour photograph Fields marked as \* are compulsory should not be more than 3 months old. NAME OF POST APPLIED FOR\*: Please put your signature **DETAILS OF CANDIDATE** across the form and the photograph 1. NAME OF CANDIDATE\*: FIRST NAME: **MIDDLE NAME:** SURNAME: 2. FATHER'S NAME\*: 3. MOTHER'S NAME\*: 4. CATEGORY (TICK  $\sqrt{}$ )\*: GENERAL ☐ SC ☐ ST (P) ☐ ST (H) ☐ OBC 🗀 5. GENDER (TICK √)\*: MALE FEMALE \_\_\_\_ 6. DATE OF BIRTH (DD/MM/YYYY)\*: 7. AGE (as on 01-01-2018)\*: Years Months Days 8. PERMANENT ADDRESS\*: P.O.: P.S.: District: State: Pin Code: 9. ADDRESS FOR CORRESPONDENCE\*: (If same as Permanent Address write "same as above") P.O.: P.S.: District:

State:

			Assan	ı State Urban Li	velihoo	ods M	issior	ı Society	2
10. CONTACT NUMBER*:									
(Candidate can mention two mobile nos.)									
11. E-MAIL ID*:									

### 12. EDUCATIONAL QUALIFICATIONS\*:

ACADEMIC	QUALIFICATION/ NAME OF COURSE	NAME OF SCHOOL/COLLEGE/INSTITUTE	UNIVERSITY/ BOARD	GRADE/ DIVISION	PERCENTAGE (%)
10 <sup>th</sup> /Matriculation					
12 <sup>th</sup> / Higher Secondary					
Graduation					
Post Graduation					
Any Other Qualification (M.Phil, Ph.D, etc.)					

#### 13. PROFESSIONAL EXPERIENCE\*:

Employment details (Post Qualification only) (Candidates may use extra sheets if required and may enclose as annexure)

				DURATION		
SI. No.	DESIGNATION	ORGANISATION	From (Date)	To (Date)	Total (in Months)	NATURE OF DUTIES
TOTAL EXPERIENCE (in Year and Months) =						

## 14. TRAINING AND OTHER COURSES ATTENDED (If any):

SI.	NAME OF TRAINING / OTHER	NAME OF		DURATION	
No.	COURSE ATTENDED	INSTITUTE	From	То	Total (in Year & Months)

# 15. LANGUAGES KNOWN\*: (PLEASE TICK $\sqrt{\ }$ )

SI. No.	LANGUAGES	WRITING	READING	SPEAKING
	English			
1				
	Assamese			
2				
	Hindi			
3				

16.
NAME
AND
<b>ADDRESS</b>
OF TWO
PERSONS
FROM WE
HOM WE MAY
/ SEEK REFEF
RENCE ABOUT Y
OU*

(The two persons must not be relatives of yours and must have interacted with you in a Professional and /

SI. No.	NAME OF THE REFERENCE (PERSON)	DESIGNATION & ORGANISATION	ADDRES		MOBILE NUMBER		
1							
2							
17. IN	•	ING COURT CASE (Wr involved in any crimin	nal case?				
		convicted by any cou					
	d) Is any case pending	g against you in court?			_		
	e) Is any case pending	g against you in Police	Station?		_		
	f) Have you ever been	debarred from appear	ring any Exai	mination by Govt.	of India/	State Govt	_
18. De	tails of PAN Card and v	alid address proof (se	If attested co	ру).			
19. Th	nis application form sho	ould be submitted alon	g with self at	ttested copies of:			
exper	oof of age, b) proof o ience certificates, d) ca ttestation)						
		DECL	ARATION				
comp under and the	undersigned, hereby collete to the best of my kerstand that in case, any hereafter, I shall be dis MS/Govt. of Assam.	nowledge and I belief of my statements are	that nothing found untrue	has been concea during any stage	led or su of recru	ıppressed. I al itment, selecti	so on
Date:				Signat	ure of th	e Candidate	
Place	:						

# **For Official Records Only**

1. Application accepted / rejected:
2. Reason for Rejection:
3. Index No
4. Date of Test/ Interview:
Name, Signature and Seal of Screening Committee Members:
Date:
Date.
Signature & Seal of Chairman, Selection Committee:
Date: