

BIO-DATA PRORORMA

Application for the post of _____

1.	Name of candidates in capital letter	:	_____	Self Attested Passport Size Photograph Paste Here
2.	Father's/Husband's Name	:	_____	
3.	Date of Birth	:	_____	
4.	Age as on 07.06.2023	:	_____	
5.	Permanent Address (with pin code)	:	_____ _____ _____	
6.	Address for correspondence (with pin code)	:	_____ _____ _____	
7.	[a] Email ID	:	_____	
	(b) Mobile No	:	_____	
8.	Category [Gen/SC/ST/OBC/DESM]	:	_____	
9.	Whether Ex-Serviceman or Not	:	_____	
	if yes, give following Details Rank _____		Medical Category _____	
	Date of Joining _____		Discharge Date _____	
	Length of Service :		Years _____ Months _____ Days _____	
10.	Educational Qualification	:	_____	
11.	Have you knowledge of Computer	:	_____	
12.	Details of experience if any	:	_____	
13.	Detail of enclosures.			
	1. _____		2. _____	
	3. _____		4. _____	
	5. _____		6. _____	
	7. _____		8. _____	

Declaration: I _____ hereby declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief and in the event of any of the information being found false or incorrect or any ineligibility being detected before or after the selection, my candidature is liable to be cancelled and action initiated against me.

Date: _____

Signature of the Candidate _____

Place: _____

Name: _____