

(Application forwarded other than this format will be summarily rejected)

Α	Name of the Po	ost Applied f	or						
В	Please Specify (put a — mark in appropriate column					Deputatio	n	Co	ontract appointment
1.	Name of the Candidate								
	(in block letters)								
2.	Age & Date of Birth				:				
3.	Sex				:		1		
4.	Religion: Caste :						Whethe	DBC	
5 a)	Address for correspondence (with pin code)					at			Please affix oneself attested recent passport size photograph
	Telephone (Landline/Mobile)				:				
	Email address				:				
6.	Present Post				:				
	Current Basic Pay				:				
	Name of Organization				:				
7 a). Academic & Professional Qualification from Graduation onwards)									
Degree/Diploma University/Insti tution					Subject				Year
7 b). Co	omputer Knowled	lge							
-					Total Years of Experience in sector/ similar projects:				8c) Total years of experience in Jalanidhi :
8 d). Details of Experience								1	
P	Post Held Period			5				Nature of Duties	
		From	n To						
			-						
9.	Additional Qualification (if any)				:				
10.	List of Training courses attended				:			X X • .	
11.	Languages Known					Read	`	Write	Speak
	English								
10	Malayalam and	(
12.	Any Documentation/Publication done (if								
12	yes, give details) Remarks (if applied earlier, specify post)								
13.	Kemarks (11 app	st)							

DECLARATION

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any particular information given above being found false or incorrect, my candidature for the post is liable to be rejected and my service are liable to be terminated forthwith without any notice to me.