APPLICATION FORM FOR THE ENGAGEMENT OF CONTRACTUAL POST-RESIDENT SUPERINTENDENT/OFFICE ASSISTANT/MULTI PURPOSE WORKER/COOK/SECURITY GUARD OF NIGHT GUARD UNDER SHAKTI

	SADAN, MISSION SHAKTI, DARRANG	Paste your self- attested colour
	Applied for the post of	photograph here
1.	Name in Full (Block letter):	
2.	Father's/ Mother's/Spouse Name:	

4. Permanent Address:

- Present Address:
- 6. Police Station and Post Office:

3. Sex: (Male/Female/Others):

- 7. Religion:
- 8. Date of Birth:

Age as on 01st January, 2025:

- 9. Caste:
- 10. Are you a citizen of India (Yes/No):
- 11. Do you belong to Physically Challenged/Divyang (Yes/No):
 (If Yes, submit a self attested copy of PwD certificate along with this application)
- 12. Educational qualification:

Name of Exam	University/Board	Subjects	Total marks	Marks obtained	Percentage	Year of Passing



14. Present oc	cupation (if any):				
	Experience (Exper	rience certifi	onto chou	old be englessed).	
Name of the Organization	Designation	From	To	Total Experiences in Year/Month	Nature of Dutie
16. Name of 1	Employment Exch	ange & Reg	istration l	No.:	
18. Mobile N	umber (Mandatory)				
stated above ar	a candidate for the e true to the best of y action the Govt.	of my know	ledge and	belief. In case of	and tany false statemen

Signature of the Applicant

NB: (1) One copy of the photograph should be pasted in the space provided and two copies to be stapled with the application (2) Self Attested copies of testimonials/certificates relating to age, educational qualification, experience etc. should be enclosed as mentioned in the advertisement.

