

Application Form

ANNEXURE-A

To  
The District Magistrate  
Paschim Medinipur

Paste recent  
colour passport  
size photo of the  
candidate with  
his/her full  
signature thereon

Application for the post of \_\_\_\_\_

1. **Name of the Applicant (in Block letters):** \_\_\_\_\_  
[Name as recorded in the Matriculation/Secondary Examination Certificate]
2. **Father's/Husband's Name** : \_\_\_\_\_
3. **Sex** : Female
4. **Date of Birth: (dd/mm/yyyy)** : \_\_\_/\_\_\_/\_\_\_\_\_  
[Date of Birth as recorded in the Madhyamik/Secondary Examination]
5. **Age** : \_\_\_\_\_ [Age as on date of 08.04.2022]
6. **Caste** : **General/SC/ST/OBC-A** (Tick the right one & annex self attested copy of caste certificate issued by the competent authority).
7. **Religion** : \_\_\_\_\_ **Nationality:** \_\_\_\_\_
8. **Mobile No.:** \_\_\_\_\_ [Mandatory] **Email ID:** \_\_\_\_\_
9. **Permanent Address** : Vill./Street: \_\_\_\_\_ P.O: \_\_\_\_\_  
Block/Muni.: \_\_\_\_\_ P.S: \_\_\_\_\_  
District: \_\_\_\_\_ Pin: \_\_\_\_\_
10. **Present Address** : Vill./Street: \_\_\_\_\_ P.O: \_\_\_\_\_  
Block/Muni.: \_\_\_\_\_ P.S: \_\_\_\_\_  
District: \_\_\_\_\_ Pin: \_\_\_\_\_

[Attach self attested copy of Aadhaar & EPIC]

11. **Educational Qualification:** [Mention from Matriculation and upwards & attach self attested copy]

Sl. no.	Name of Exam./ Diploma/Degree/ Course	Year of passing	University/Board/ Institute	Full marks	Marks obtained	% of Marks obtained
1						
2						
3						
4						
5						
6						

12. **Details of post qualification experiences:** [Attach self attested copy of experience certificate]

Sl. no.	Name of Organization	Govt./Private/ NGOs	Period		Total Experience
			From(date)	To (date)	
1					
2					
3					
4					

**Declarations:**

I do hereby declare that all the statements made by me in the application are true and complete to the best of my knowledge and belief. I also understand that in case any of my statement is found false or incorrect during any stage, it shall disqualify me for the post applied for and/or I shall be liable for any other action that may be taken under the extant rules.

Yours faithfully,

\_\_\_\_\_  
Signature of the Applicant

Date : \_\_\_\_\_  
Place : \_\_\_\_\_