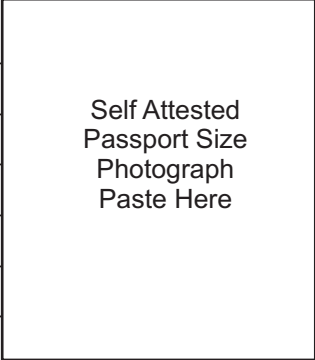# BIO-DATA PRORORMA

Application for the post of _____

1. Name of candidates in capital letter : _____

2. Father's/Husband's Name : _____

3. Date of Birth : _____

4. Age as on 07.06.2023 : _____

5. Permanent Address (with pin code) : _____

_____

_____

Self Attested Passport Size Photograph Paste Here

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: _____

Place:_____

Signature of the Candidate _____

Name: _____