APPLICATION FORM FOR THE POST OF

i. Name of the post

ii. Name of the District applied for

iii. Name of Candidate

iv. Mother's Name

v. Father's / Husband's Name

vi. Permanent Address

vii. Correspondence Address

viii. Telephone Number / Email ID/ Aadhar No.

ix. Date of Birth (as per certificate of High School)

x. Present Age (DD-MM-YY)

xi. Domicile of Haryana State.(attached copy)

xii. Educational Qualifications

xiii. Self Declaration attached:

Yes/No

Attested

passport

size

Photogra

Sr. No	Qualification (onward from Matriculation)	Name of the School/ University	Marks obtained/Total marks	Percentage
1	2	3	4	5
5				

xiv. Experience

4

Name of organization	Name of Post	Period (From - to)	Total Duration	Job Responsibility	Last Salary drawn	Remarks
1	2	3 '	4	5	6	7
			X X X X X X X X X X X X X X X X X X X			

xix Experience in Child Welfare Committee/ Juvenile Justice Board

Name of District	Name of Post	Period (From - to)	Total Duration	Job Responsibility	Last Salary drawn	Remarks
1	2	3	4	5	6	7

<u>Declaration:</u> "I hereby declare that all the statements made as above are correct and complete to the best of my knowledge and belief and if at any stage it is found incorrect, I shall be held responsible for it and the appointing authority has the right to terminate my service."

Place:

Date:

Signature of applicant