APPLICATION FORM FOR THE POST OF

Name of the post

Name of the District applied for

ii. Name of Candidate iii.

Mother's Name

iv. Father's / Husband's Name

v, Permanent Address vi.

Correspondence Address vii.

Telephone Number / Email ID/ Aadhar No. viii.

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

Present Age (DD-MM-YY) X

Domicile of Haryana State.(attached copy) XI.

Educational Qualifications XII.

Self Declaration attached: xiii.

Yes/No

Attested

passport

size

Photogra

Sr.	Qualification (onward from Matriculation)	Name of the School/ University	Marks obtained/Total marks	Percentage	
1	2	3	4	5	

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

Experience in Child Welfare Committee/ Juvenile Justice Board XIX

Name of District	Name of Post	Period (From – to)	Total Duration	Job Responsibility	Last Salary drawn 6	Remarks 7
						at and

Declaration: " 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:

Dave:

Signature of applicant