APPLICATION FORM FOR THE POST OF FOREST GUARD

(To be filled in capital letters)

Date of receipt of application	
Roll number	

Affix a recent passport size self attested photograph

(FOR OFFICE USE ONLY)

Remarks if any

(10	DE LIFTED BA	CANDIDATE)	
1.	Name in full		-
2.	Father/ Mother	name	
3.	Spouse name		
4.	Date of Birth ar	nd Age 019)	
5.	Category (Gen		
6.	Ex-Service Mer If yes please give certificate etc.	(Yes/No) ve the details of discharge	
7.	Place of birth ar (name of Island	nd Nativity)	
8	Marital Status		
9	Permanent addi	ress	
10	Address for communication	Present address	
		Mobile No	
		E-mail id	

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11. Educational Qualifications

SI No	Educational Qualification	% of Marks	Board / University	Year of pass
1.	Pre- Degree / Plus 2 Science			
2	Any other			

12. Physical slandered

1.	Height (in cm)	
2	Chest (in cm)	
3.	Chest Expansion (in cm)	

13. Declaration

I certify that information furnished above are true and correct to the best of my knowledge and belief.

Place:

Date:

Name & Signature of the Candidate

List of enclosures attached with this application:

Testimonials	Submission(√)	Remarks (for Office use only)
Proof for Age.		
Proof for educational qualifications.		
Nativity certificate		
Community Certificate (ST)	10%	
Ex-Servicemen Certificate		
Two recent passport size photographs (With name & signature at the back side)		Α

Name & Signature of the Candidate

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