APPENDIX - "A"

APPLICATION FOR THE POST OF SI (MIN) LDCE FOR THE YEAR 2018

For o	ffice use only	Roll No.	
	(Particulars to l	pe filled by the candidate)	
1.	Force No. & Rank	I	Paste here passport size photograph
2.	Force UID No.	:	(self attested)
3.	Name of applicant	:	
4.	Unit :		Y
5.	Date of Birth		1
6.	Age as on 01.04.2018	:	
7.	Gender	· · · · · · · · · · · · · · · · · · ·	
8.	Personal marks of identification	:	
9.	Date of appointment in Service &	k Rank :	
10.	Date of appointment to the prese Rank	nt	
11.	Total period of service rendered present rank as on 1 st April of va year (i.e. on 31.03.18 the applica have completed 03 years of regulas ASI/Min.).	cancy nt should	
12.	Educational Qualification	:	
13.	Category (Gen/OBC/SC/ST)	1	
14.	Details of punishment / rewards	<u>:</u>	
15.	No. of chances of LDCE availed and details thereof	:	
16.	Medical Category	:	
17.	Present Address	:	
18.	Permanent Address		

19. Force issued identity Card No.

20. Mobile Number

I hereby declare that the above information is true to the best of my knowledge and belief. In case, information is found to be false or incorrect, my candidature is liable to be cancelled apart from any departmental or legal proceedings that may be initiated against me.

Signature of the applicant

Name	e		

NO OBJECTION/ DATA CORRECTNESS CERTIFICATE

Certified that the particulars given by the individual have been checked and found correct. This office has no objection for his/her appearing in SI(Min) LDCE. He/ She is eligible/not eligible for SI(Min) LDCE for the year 2018.

Signature of Unit Head With Name & office seal

18.4.19

SERVICE CERTIFICATE FOR SI(Min) LDCE-2018

(to be issued by the concerned unit)

	It	is	to	certify	that	UIN	Rank	Name
			of			Bn./ Area	/ TC/ SHQ/ FTR	/FHQ has
							n 01.04.2018 and	
			servi	ce. The	individu	al also bear	s a good record of	of conduct
and c	haract	er.						
							nce/ disciplinary of	
•				_			he will be release	
			gnmei	nt in case	of his/h	er selection	to the post, to wh	ich he/she
nas a	pplied	ior.						
							5-16, 2016-17 & 2	017-18 in
respe	ct of s	aid o	fficial	is appen	ded belo	w:-		
	(i)	20	15-16		•			
	(ii)	20	16-17		:			
	(iii)	20	17-18		<u>.</u>			
Place	:			-		Signature	of the Unit Head	
Date:						Name:		
						Designation	on:	
						Office sea	1	

18.4.19

ADMIT CARD

FOR LIMITED DEPARTMENTAL COMPETITIVE EXAMINATION FOR THE POST OF SI(MIN) IN SSB FOR THE YEAR

FOR OFFICE USE ONLY ROLL NO.

(NOT	E:- PARTICULARS TO BE FILLI	ED IN I	BY THE CANDIDA	TES)	Paste	self
1.	UIN	:			attested passport	
2.	Force No. & Rank	•			photogra	ph
3.	Name of Candidate	:				
4.	Father's Name	:		, l		
5.	Date of Birth	;				
6.	Gender	:				
7.	Personal Marks of identification	:				
	(a)					
	(b)					
8.	Permanent Address	:				
9.	Present Unit Address	:				
10.	Category (Gen/OBC/SC/ST):					
11.	Dept. issued identity Card No.	2				
J-19			(Signature of the	candid	ate)	

Signature of Nodal Officer, ARC