

APPLICATION FORM
Madurai District Cooperative Milk Producers' Union Ltd
Madurai-20
 (For the post of Technician)

Please affix recent
passport size photo
here

Post applied for	
Advertisement No. and Date	

1.	Name of the Candidate (in BLOCK LETTERS)												
2.	Gender (Tick in relevant Box)	Male											Female
3.	Date of Birth	Date				Month				Year			
4.	Age as on 1 st Jan/ 1 st July of the year (as the case may be) (in completed years)												
5.	Father's Name												
6.	Mother's Name												
7.	Marital Status (Tick in relevant Box)	Married								Unmarried			
8.	Spouse Name Husband/ Wife												
9.	If applicant is Female	Widow				Destitute Widow				Others			
10.	Place of Birth												
11.	Native District and State												
12.	If other than TN, Specify the Name of the State												
13.	Mother Tongue												
14.	Other Languages known												
15.	Nationality (Tick in relevant Box)	Indian								Others			
16.	Religion (Please specify)												
17.	Address for Communication												
	Door No.	Street Name:											
	City / Village:	District :											
	State:										Pin Code:		

18.	Permanent Address		2									
	Door No.					Street Name:						
	City / Village:					District :						
	State:					Pin Code:						
19.	Communal Category (Please Tick in relevant Box)			OC	BC	MBC	SC	SC(A)	ST	DNC		
20.	Name of the Sub Caste											
a.	Community Certificate No.											
b..	Date of Issue			Date			Month		Year			
c.	Issuing Authority											
d.	Name of the Taluk											
e.	Name of the District											
21.	Are you a Differently Abled Person?			Yes				No				
	If Yes, please specify											
22.	Whether Coming Under Priority? If yes, tick the relevant box		DW	Inter Caste Marriage	Ex-Service man Dependents of Ex-service man, dependents of serving Army personnel's	Freedom Fighter and Thiyagis for Tamil language	Burma/Ceylon Repatriate	Owner of the land acquired by Govt.	Physically Hand-capped exclusively Ortho	Orphans	Not applicable	
a.	Certificate No.											
b.	Date of Issue			Date			Month		Year			
c.	Issuing Authority											
d.	Name of the District											
e.	Name of the Taluk											
23	Educational Qualification		Medium of Instruction	Name of the Institution	Year of Passing	Total Marks	Marks Secured	%	Grade/Class			
	a.	S.S.L.C										
b.	H.S.C. (+2)											
c.	ITI/Teacher Training (2 Years)											
d.	Diploma											
e.	Degree (3 years)											
f.	Diploma in Co-op.											
g.	Post Graduate Degree											
h.	M. Phil.											