Appli	cation F	ormat for the Post	OI						
Notice No 246/DYO/JGM/2017			Dated- 07/06/2019			a	Affix a self attested colour		
Jhargr		agistrate & Sports Section)				p	hotograph		
2. 3. 4. 5. 6. 7.	Name in Full (In Bloc):  Sex (Put a tick): Male Female  Fathers/ Husbands Name:  Caste (Gen/SC/ST/OBC-A/OBC-B):  Date of Birth: Age as on 01.01.2019:  Contact No.:  Permanent Address:								
9.	. Present Address : with Pin Code  Academic Qualification								
	Sl. No.	Examination Pass	sed	Year of Passing	Board/ University	7	arks ained Pero	centage	
	Work I	Experience Name of Or	rganization		Designation & Na	ature of Wo	of Work Dura		
	I, SOLEMNLY DECLARE THAT (A) ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE; (B) ORIGINAL DOCUMENTS WILL BE PRODUCED ON THE DATE OF VIVAVOCE; (C) I UNDERSTAND THAT THE CONCERNED AUTHORITY DESERVES THE RIGHT TO REJECT MY CANDIDATURE UPON SHORT LISTING OF THE CANDIDATES BASED ON QUALIFICAIONS AND EXPERIENCE AS DESIRED BY THE CONCERNED ATHORITY.								
	Date: Signature of					e of the Can	didate		
i)		Enclosures (Put a tick							
ii)	Self attested copy of Caste certificate, if any.								
iii)	Self attested copy of Voter ID.								
iv)	Self attested copy of documents in connection with Educational Qualification.								
v)	Self attested copy of Working Experience Certificate, if any.								