

FORMAT OF APPLICATION

(FOR THE POST OF JR. CLERK-CUM-COPYIST, JR. TYPISTS AND JR. STENOGRAPHER)

POST APPLIED FOR: (in Block letters) _____.

1. Name of the Candidate: (in Block letters)
2. Father's/Husband's Name:
3. Sex (Male/Female):
4. Marital status (Married/Unmarried):
5. Permanent Address:
6. Present Address:
7. Date of Birth: _____, (Age as on 01.08.2019):
8. Educational Qualification: (Attach self-attested copies of ...

Self attested
passport size
photograph

Days	Months	Years

Name of the examination passed	Name of the Board/ University	Year of passing	Aggregate of marks secured	Grade / Division	% of marks secured
H.S.C.					
+2Arts/ Science/ Commerce					
Diploma in Computer Science.					

9. Category: (SC/ST/SEBC/GEN/Sports Person/Ex-Servicemen):
(Strike out which is not applicable and attach the supporting documents issued by the competent authority)
10. Whether Physically/ Orthopedically handicapped:
(If yes, attach supporting medical certificates issued by the Competent Medical Authority/Board)
11. Religion:
12. Nationality:
13. Employment Exchange Registration No.:
14. Attach two Character Certificates issued by two Gazetted Officer / Medical Practitioner / Sarpanch etc.
(Mention the name & designation of the officers):
15. Details of Treasury Challan with No. & Date:

DECLARATION.

I do hereby solemnly affirm and state that I am aware about the provisions of Orissa District and Subordinate Courts Non-Judicial Staff Services (Method of Recruitment and Conditions of Service) Rules, 2008 (amendment Rules 2010) and the statements made above are true and correct to the best of my knowledge and belief and based on record.

Signature of the Candidate.

FORMAT OF APPLICATION
(FOR THE POST OF SALARIED AMIN)

1. Name of the Candidate: (in Block letters)
2. Father's/Husband's Name:
3. Sex (Male/Female):
4. Marital status (Married/Unmarried):
5. Permanent Address:
6. Present Address:
7. Date of Birth: _____, (Age as on 01.08.2019):
8. Educational Qualification: (Attach self-attested copies of ...

Self attested
passport size
photograph

Days	Months	Years

Name of the examination passed	Name of the Board/ University	Year of passing	Aggregate of marks secured	Grade / Division	% of marks secured
H.S.C.					
+2Arts/ Science/ Commerce					
Diploma in Computer Science.					
Revenue Inspector Training					

9. Category: (SC/ST/SEBC/GEN/Sports Person/Ex-Servicemen):
(Strike out which is not applicable and attach the supporting documents issued by the competent authority)
10. Whether Physically/ Orthopedically handicapped:
(If yes, attach supporting medical certificates issued by the Competent Medical Authority/Board)
11. Religion:
12. Nationality:
13. Employment Exchange Registration No.:
14. Attach two Character Certificates issued by two Gazetted Officer / Medical Practitioner / Sarpanch etc.
(Mention the name & designation of the officers):
15. Details of Treasury Challan with No. & Date:
16. Experience (if any) :

DECLARATION.

I do hereby solemnly affirm and state that I am aware about the provisions of Orissa District and Subordinate Courts Non-Judicial Staff Services (Method of Recruitment and Conditions of Service) Rules, 2008 (amendment Rules 2010) and the statements made above are true and correct to the best of my knowledge and belief and based on record.

Signature of the Candidate.

FORMAT OF APPLICATION**(FOR THE POST OF DRIVER.)**

1. Name of the Candidate:
(In Block letters)
2. Father's Name :
3. (a) Permanent Address:
(b) Present address :
4. Nationality :
5. Religion :
6. Educational Qualification: (Attach self-attested copies of ...

Self attested Passport size photograph.

Name of the examination passed	Name of the Board/ University	Year of passing	Aggregate of marks secured	Grade / Division	% of marks secured
H.S.C.					
+2Arts/ Science/ Commerce					

7. Date of Birth : _____, (Age as on 01.08.2019):

Days	Months	Years
8. Category: (SC/ST/SEBC/GEN/Sports Person/Ex-Servicemen):
(Strike out which is not applicable and attach the supporting documents issued by the competent authority)
9. Marital Status :
10. Driving License No. and date:
11. Attach two Character Certificates issued by two Gazetted Officer / Medical Practitioner / Sarpanch etc.
(Mention the name & designation of the officers):
12. Details of Treasury Challan with No. & Date:
13. Certificate of experience :

DECLARATION.

I do hereby solemnly affirm and state that I am aware about the provisions of Orissa District and Subordinate Courts Non-Judicial Staff Services (Method of Recruitment and Conditions of Service) Rules, 2008 (amendment Rules 2010) and the statements made above are true and correct to the best of my knowledge and belief and based on record.

Signature of the Candidate.