

APPLICATION FORM FOR COMPETITIVE EXAMINATION FOR  
RECRUITMENT TO THE CADRE OF MTS FROM ELIGIBLE GDS  
FOR THE VACANCY YEAR 2019 (01.01.2019 TO 31.12.19)- TO BE  
HELD ON 15<sup>th</sup> MARCH, 2020.

Affix recent  
passport sized  
photograph duly  
attested by  
Divisional  
Head/Unit Head.

Note: All Particulars shall be filled up in BLOCK letters.

Sl. No.	Particulars	Detail(s)
1	Name of the candidate	
2	Male / Female	
3	Designation	
4	Name of the Division /Unit	
5	Date of Birth (attach self-attested matriculation certificate/marks sheet)	
6	Age as on 01.01.2019	YY/ MM / DD
8	Category (UR/OBC/SC/ST/EWS)	
9	Date of entry in the Department	
10	Date of appointment as GDS on regular basis	
11	Period of regular service rendered as GDS as on 01.01.2019	YY/ MM / DD
12	WHETHER PERSON WITH DISABILITY(ies)	NO <input type="checkbox"/> YES <input type="checkbox"/>
12.1	IF YES, NATURE OF DISABILITY(ies) (OH/HH/VH/OTHERS)	
	PERCENTAGE OF DISABILITY(ies)	
13	Whether working in APS (Yes/ No)	
14	Whether any penalty pending or contemplated (Yes/No) If yes, details thereof.	
15.	Language chosen for answering questions, as specified in Annexure-E of Department of Posts' letter No. 17- 08/2018-SPB-I dated 10.05.2019, 28.06.2019, 11.07.2019 & 23.07.2019	

**DECLARATION:**

I hereby declare that the particulars furnished in the application form are true, complete and correct to the best of my knowledge and belief and will be supported by the original documents as and when required. I fully understand that in case of False/Incorrect information found at any stage, my candidature/appointment will be summarily rejected/terminated and appropriate action would be taken against me.

DATE	
PLACE	

Signature of Candidate

I certify that I have verified the particulars of candidate from service record and found correct / incorrect. The candidature of the applicant is RECOMMENDED / NOT RECOMMENDED. In case NOT RECOMMENDED, reasons therefore.

DATE	
PLACE	

Signature of Divisional /Unit Head with designation stamp