

APPLICATION FORM FOR WALK-IN-INTERVIEW ON _____ FOR PROGRAM ASSOCIATE /
PROGRAM ASSISTANT / DATA ENTRY OPERATOR (ON CONTRACT BASIS)

1. Employment Notification No.09/2022
2. Post applied for _____
3. Preferred place : _____
4. Name (in block letters) _____
5. Father's/Husband's name _____
6. Mother's name _____
7. Address (Permanent) _____

8. Address for correspondence: _____

9. Date of birth __/__/____(dd/mm/yyyy)
10. Category: (SC/ST/OBC/EWS/others) _____
11. Age as on the date of Interview _____
12. Educational Qualification:

Degree/Exam	Name of the Board/University	Year of passing	Subject	Percentage/Division

13. Experience

S.No.	Name of the Department/Section	Name of the post held	Date of joining	Date of leaving

14. No. of Publications: _____
15. No. of Conferences-Participated/Presented: _____

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect I candidature is liable to be cancelled/terminated. I will have no claim for absorption after termination / completion of contract tenure. I shall abide by terms and conditions as prescribed. In the event of ineligibility being detected before or after the selection procedure, action can be taken against me under the relevant rules/instruction and hereby undertake to abide by them.

Date

(Signature of the Candidate)