Annexure-I



INDIAN COAST GUARD DIRECTORATE OF RECRUITMENT C-1, PHASE-2, INDUSTRIAL AREA SECTOR – 62, NOIDA,UP – 201309

Affix a recent Passport Size Photograph

APPLICATION FOR CIVILIAN POST FOR THE VACANCY YEAR 2023

NAME OF P	OST APPLIED FOR	

1.	Name of the Applicant (in bloc	ck letters):
2.	Date of Birth	
3.	Father's Name	:
4.	Permanent Address	:
5.	Correspondence Address (with Pin Code)	:
6.	Mobile Number	:
7.	Email id	:
8.	Photo ID No.	:
9.	Aadhaar card no.	:
10.	(a) Educational Qualifications	:

Examination Passed	Year of Passing	Division/ Percentage of Marks	Name of Board	University/

(b) `	Years of Exp	erience (in releva	nt fie l d)	:				
11.	Gender (M	1ale/Female)		:				
12.	Category /	Applied:-						
	UR	SC S	ST	ОВС	E\	ws _		
13.	Identificat	ion Marks:-						
	(a)							
	(b)						_	
14.	Are you a	Government Emp	loyee? Ye	s/No				
	If Yes, ple	ease furnish the fo	llowing de	etails:-				
Add the	Address of State/ Public pos				Date Joining Service	of the	Date Leaving service	o the
15.		L cuments forwarde		th the ap	•			:
SI.	TIT	LE OF DOCUMEN	TI	DATE OF ISSUE OF CERTIFICATE				
(a)	Matriculation Mark sheet & Certificate				CERTI	IFICAI	<u> </u>	
(b)		ate Marksheet & C	ertificate					
(c)	Industrial Training Institute (ITI) Marksheet & Certificate							
(d)								
(e)	Experience Certificate							
(f)		Certificate {EWS/C ver) / SC/ST}	BC (Non					
(g)	NOC from Employer							
(h)	Photo ID F 8 above)	Proof (as mention	ed at SI.					
(j)		ecent passport hs	t size					
(k)		elope with Rs. 5	0 postal					

stamp pasted on it

DECLARATION BY THE CANDIDATE

- (a) I hereby declare that all statements made in the application form are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect at any point of time, my candidature/appointment may be cancelled/terminated without any notice. I also declare that I am a citizen of India by birth/domicile.
- (b) I have informed my head office/department in writing that I am applying for the post. NOC enclosed (wherever applicable).

	1
Place :	
Date :	Signature of the applicant

Left Hand Thumb Impression