Central Recruiting Agency

HQ PH & HP (1) Sub Area, Ambala Cantt.

District: Ambala State Haryana PIN: 133 001

otate manyama									
PIN: 133 001									
APPLICATION I									
			-	for any post. I			_		
Reference Newsp	aper		Ad	lvertisement I	No		_dated		
1. Post applied for							Affix la	atest	
2. Name of Candidate (in block letters)								passport size	
3. Father's/Husbar	nd Name					_	photog		
4. Mother's Name	lame							duly self	
5. Date of Birth:		DD N	MM Y	YYY			attes www.nauk		
6. Gender (Male / 7. Age as on last d	ate preso	cribed for re	eceipt of ap	plication Year	s N		Days		
8. Nationality/Reli					-				
9. Address for Cor									
House No									
		Tehsil State							
				State	=		PIN (Lode	
10. <u>Permanent Ad</u> House No		Ctroo	s+/Millago						
Post Office							DIM (Sl -	
		State Email-ID:							
				Email-ID:				_	
12. Educational Q	<u>ualificati</u>	<u>on</u>							
Ser Qualifica	ation	Nam	ne of	Name	e of	Percen	tage of	Division	
No Quanne	•		Name of School/College		Board/University		Percentage of Divi		
		30.100.7	concac			Trial No C	- Brannea		
Note: Attach Self	Attested	Mark Shee	t of all edu	ıcation qualifi	cation & E	xperience	certificate	S.	
13. Category for v	which ap	plied (Pleas	e tick one)	and Enclose	Caste Certi	ficate on F	rescribed	format:-	
UR		OBC		SC		ST		EWS	
14. If applied for t(a) Date of enroln(b) Date of Retire	nent (in A	Army/Navy/	Air force):						
(c) Total Service:						Days			
(Attach copy of di	scharge	certificate)							

15. Whether registered wi	th any Employment Exch	ange Yes/No_						
(If yes, mention Registration	on Number and name of ϵ	employment ex	change)					
16. Whether employed in		Yes/No						
If yes, mention service d								
Name of Employer	Office Details	Name of the	Post	Date of Appointment				
			0 .:					
Note. Central Govt. Civilia employer/office with app	• •	•		e from their				
employer/office with app	ilcation eise their candid	ature will be ca	nceneu.					
17. Along with this application	ation, I have enclosed all	documents/cei	rtificates/p	hotographs as mentioned				
at Paragraph 7 of advertis			,,	5 1				
•	<u>DECL</u>	<u>ARATION</u>						
				ue and correct to the best of				
my knowledge and belief. I understand that in the event of my information being found false or incorrect								
at any stage or not satisfying the eligibility criteria according to the requirements of the advertisement, my candidature/ appointment is liable to be cancelled / terminated. I agree that department has the right								
to transfer/ post me to an		ied / terminated	ı. ı agree tr	iat department has the right				
to transfer/ post file to all	ywnere in maia.							
Place:]					
Dated:	re of candidate)							
		·						
			•					
*Left Thumb Impression in	n case of male candidate a	and right thumb	impressio	n in case of female				
candidate.	EOD OFFICE	RECORDS ONLY	,					
1. Application received on		RECORDS ONLY	_					
2. Application accepted/re								
• •	•	nents incomplet	e /Photo o	r documents not attested /				
any other reason to be spe								
4. Roll No	Date of Te	st						
	ACKNOWLE	DGEMENT CARE	<u>)</u>					
1. Name				Affix latest				
2. Date of Birth				passport size				
3. Father's Name				photograph				
4. Name of the Post				duly self attested				
				www.naukarinew.in				
5. Correspondence Addres	SS:-							
House No /Street/Village .		Post Offic	e					
Tehsil	State	Dist		PIN				
Mobile No	Email							
6. Date of reporting for Te	st							
7. Venue for Test								