A P P L I C A T I O N F O R M

District Child Welfare Council Ambala Vacancy

Application for the Post of _____

Paste your recent passport size photograph

1. Name of the Post Applied for: …….

2. Full Name of the Candidate: ……
(in Capitals)
…….....

3. Date of Birth: ☐☐ ☐☐ ☐☐☐☐
Day Month Year

4. Gender (please tick √): Male ☐ Female ☐

5. Marital Status: ……..

6. Father's/Husband's Name: ……

7. Mailing Address (in block letters): …….

……..

…….. Pin Code: …….

Tel. No. : …… Mobile: …….....

E.mail ID (if any): …….....

8. Nationality: ……..

9. Whether Physical Handicapped? (please tick √) : Yes ☐ No ☐

10. Community (please tick √) SC ☐ ST ☐ OBC ☐ GENERAL ☐ Other _____

11. All Educational/other professional Qualifications/Training Courses etc/Degree Examination onwards:

Level	Exam passed/ Degree Trg.	Division/Grade % of Marks	Year of Passing	Duration of the Degree/ Diploma	Board/ University	Subject	Subject of Specialistion

12. Any other relevant Information: …….....

13. Details of enclosures: 1) ……....

2) ……....

3) ……....

I hereby declare that all the statements made in the application are true and complete to the best of my knowledge and belief. I understand that action can be taken against me by the Commission, if I am declared by them to be guilty of any type of misconduct mentioned herein. I have informed my Head Office/Deptt, in writing that I am applying for this selection.

Date: **Signature of candidate**

Place: