



Registration / Roll No. _____ (for office use only)

Application for the post of _____
(Advertisement No. CMOH/APD/11593 Dated 10.05.2021)

To,
The CMOH & Secretary,
DH&FW Samiti, Alipurduar.
Matrisadan Building, 1st Floor, New Alipurduar, Ward No-XVI, Dist-Alipurduar, Pin: 736121

1. Name of the Applicant (In Block Letters) :
2. Father's/Husband Name (In Block Letters) :
3. Permanent Address (In Block Letters) : _____

_____ Post Office: _____

District: _____ Pin: _____

4. Sex : _____ 5. Date of Birth (DD/MM/YYYY): _____ / _____ / _____

6. Age as on 01.01.2021: _____ Years _____ Month(s) _____ Day(s)

7. Caste (General/SC/ST/OBC) : _____ 8. Mobile No. : _____

9. e-mail: _____

10. Essential Qualification & Other (Attested/ Self Attested copy must be submitted with the Application)

Examination Passed	Year of Passing	Board/University/Institution	Total Marks (Excluding Optional)	Marks Obtained (Excluding Optional)	% of Marks
Madhyamik (10th)					
HS'(10+2)					

Declaration

I hereby solemnly declare that the information furnished above are based on material records and are true to the best of my knowledge and belief. If any information furnished or any part of it is found to be incorrect, my candidature is liable to be cancelled.

Place:

Date:

Signature of the Applicant