

APPLICATION FORM

To
The Chairman
Jhalda Municipality,
Dist: Purulia, W.B.

Coloured Passport
Photo with Signature
of the Applicant to be
affixed.

Name of the Post with Category Applied for: _____

1. Applicant Name (In block letter):- _____

2. S/D/W of:- _____

3. Communication Address (With Pin Code) _____

4. Date of Birth:- _____ Age (as on 01.01.2019) _____

5. Nationality:- _____ 6. Caste-belonging to :- _____

7. Contact Mobile No: _____ e-mail id: _____

8. Educational Qualification:-

NAME OF EXAM	BOARD/UNIVERSITY	TOTAL MARKS	CLASS/DIVISION	PERCENTAGE OF MARKS

9. Working Experiences:-

SL NO.	NAME OF ORGANISATION	POSITION HELD	PERIOD OF WORKING	TOTAL PERIOD OF WORKING EXPERIENCES	NATURE OF WORK

Declaration

I do hereby declare that the statements made in the application are true to the best of my knowledge and belief and if any of the information given there in is not in conformity with this Advertisement my candidature shall liable to be cancelled.

Dated:-

Signature of the Applicant