## APPLICATION FORM FOR CONTRACTUAL RECRUITMENT OF ACCOUNTANT/DATA ENTRY OPERATOR IN RUPASHREE PRAKALPA UNDER DPMU, DARJEELING 3 HILL SUB-DIVISION

(Form should be filled in with ball pointed pen in own handwriting. Incomplete form without attached documents and form not delivered in due mandate time are liable to rejection)

In reference to	the Notice vide Memo	o No.1	.11/DPMU/DJ/19	9-20 dated 12/03	3/2020; I am wi	lling to apply fo	r Recent Colore	
							passport size	
Post Applied for:							pasted and due	
(In Block Letter:	s)						signed by the Applicant.	
2. Date of Bi	rth:/		Age as on 01	<b>/01/2020:</b> (D)	(M)	(Y)		
3. Gender (N	/lale/Female/3 <sup>rd</sup> G	ende	r):	Martial St	atus:	('/		
4. Father's/H	lusband's Name: _							
5. A) Categor	ry (SC/ST/OBC/GE	N):						
	er physically handi							
	or Correspondence							
				P.S.				
7. Permanent Address:			DistPin Village/Street					
, , cimanen	t Address.							
		P.O						
Tel No. (with STD Code):			DistPin					
	al Qualifications:		iviobile		Emali ld			
Exams								
Passed	Board/University		Subjects		Year of	Division   % Marks		
		_	tus.		Passing			
		25125						
			1					
9. Details of \	Nork Experiences:		1					
SI. No. Name of the Organization		ization/Institution Post		Post		Period (fr	Period (from-to)	
							(1.0)	
10. Details of	Computer Knowle	edge/	<b>Qualification</b>	s:				
	Institution/University		Subjects		Year of	Division	%	
Passed					Passing		Marks/Grade	
						,		
Enclose Solf Atte	stad abatasais - f							
enciose sen-Atte	sted photocopies of a	II proc	ofs in respect of S	il. No. 01 to 10 (	except 1, 3 &4)	must be attache	ed.	
"I hereby declar	re that all the statem	entc	made hy me in	tha annliastic				
of my knowledg	ge and balief. I also d	eclari	that in case m	v statement fo	ure true, corri	ect and compli	ete to the best	
ecruitment and	d thereafter, I shall a	bide l	by the decision of	of the Authority	unu juise or m uincludina car	correct during	any stage of	
or appointment	under the extant of	ruies.	"	of the Adenority	including cur	icenution of m	y canaiaature	
DATE:	All A							
PLACE:								
					Full S	ignature of th	e applicant	