APPLICATION FORM FOR THE POST OF Name of the post Name of the District applied for Name of Candidate Mother's Name

Attested passport size Photogra

Father's / Husband's Name ٧. vi.

ii.

iii.

iv.

Permanent Address

Correspondence Address vii.

Telephone Number / Email ID/ Aadhar No. viii.

Date of Birth (as per certificate of High School) ìx.

Present Age (DD-MM-YY) х.

Domicile of Haryana State.(attached copy) xì.

Educational Qualifications xii.

Self Declaration attached: xiii.

Yes/No

Sr. No	Qualification (onward from Matriculation)	Name of the School/ University	Marks obtained/Total marks	Percentage	
1	2	3	4	5	
1					

Name of organization	Name of Post	Period _e (From – to)	Total Duration	Job Responsibility	Last Salary drawn	Remarks
1	2	3	4	5	6	7

Experience in Child Welfare Committee/ Juvenile Justice Board xix

Name of District	Name of Post	Period (From - to)	Total Duration	Job Responsibility	Last Salary drawn	Remarks
1	2	3	4	5	6	7

Declaration: " I hereby declare that all the statements made as above are correct and complete to the best of my knowledge and belief and if at any stage it is found incorrect, I shall be held responsible for it and the appointing authority has the right to terminate my service."

Place:

Signature of applicant

Date: