## Urban Development Department, Uttarakhand

Advertisement no:1561/UDD/AMRUT/2016-17

Dated:16.11.2016

APPLIED FOR										Affix Re Self-att	
POST APPLIED FOR								,		Passpor	
									L		
Full Name (In block Letter)											
Date of Birth	D	D	M	M	Y	Y	Y	Y	Age	e as on 30	0-11-2016
Gender		Male					F	emale			
Nationality											
Father's Name/Husband's Name											
Address for Correspondence											
Permanent Address											
Telephone No :-	1	Mobile									
relephone No	1 2	Mobile	ne (with	STD	ode)						
	3	E-Mai									
Details of Educatio	nal and	Technica	al Qualif	icatio	n (From	matricu	lation/	SSLC/SS	C onwa	ards)	
Examination Passed	/Boar	Unive d/Institu of Exam	rsity tion/Cou		Month	/Year of	Divis	sion/ ss/Gr de		Subje	ects
		Sugar .		Mar Ve							

(Additional sheet may be enclosed for any other details of experies)  Note: (Please Also Attach Your Latest Detail C.V.)  If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category a	Total Monthly	Nature of Duties	Designation	ervice	Period of	Details of previous / Name of the	
Note: (Please Also Attach Your Latest Detail C.V.)  If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category a	Emoluments	Performed		То	From	Organization	
Note: (Please Also Attach Your Latest Detail C.V.)  If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category a							
If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category a		K					
If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category  a							
If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category  a			ψ-				
If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category  a							
If Selected, specify the minimum required joining time  Languages Known (Mark) In appropriate category  a		and details of experience	land for any oth		121 1 1 1		
Languages Known (Mark) In appropriate category  a	nce)	er details of experience	losed for any oth	ay be enc	ditional sheet m	(Ad	
Languages Known (Mark) In appropriate category  a							
Languages Known (Mark) In appropriate category  a			C.V.)	est Detail	ttach Your Lat	Note: (Please Also A	
Languages Known (Mark) In appropriate category  a							
a							
a							
I hereby declare that all statements made in this application are true, complete and my knowledge and belief and understand that in the event of any information being at any stage or not satisfying the eligibility criteria according to the requirement of the advertisement my Candidature may be Cancelled, even after my appointment. I undertake to abide by all the terms & conditions mentioned in the advertisement girl			egory	priate cat	Mark) In appro	Languages Known	
I hereby declare that all statements made in this application are true, complete and my knowledge and belief and understand that in the event of any information being at any stage or not satisfying the eligibility criteria according to the requirement of the advertisement my Candidature may be Cancelled, even after my appointment. I undertake to abide by all the terms & conditions mentioned in the advertisement girls.  Place:			k) b	rite) (spea	(Read) (w	a	
my knowledge and belief and understand that in the event of any information being at any stage or not satisfying the eligibility criteria according to the requirement of the advertisement my Candidature may be Cancelled, even after my appointment. I undertake to abide by all the terms & conditions mentioned in the advertisement girll Place:	(Read) (write) (spea	(R	ak) d	vrite) (spe	(Read) (	C	
my knowledge and belief and understand that in the event of any information being at any stage or not satisfying the eligibility criteria according to the requirement of the advertisement my Candidature may be Cancelled, even after my appointment. I undertake to abide by all the terms & conditions mentioned in the advertisement girll Place:							
advertisement my Candidature may be Cancelled, even after my appointment.  I undertake to abide by all the terms & conditions mentioned in the advertisement gi	found false or incorre	y information being fou	n the event of an	tand that i	lief and unders	my knowledge and be	
Place:		appointment.	ed, even after my	e Cancelle	ndidature may b	advertisement my Ca	
	en by the department	ne advertisement given	s mentioned in th	condition	y all the terms	I undertake to abide b	
						Place:	
Date: Signature	of the Candidate	Signature of				Date:	
Name:-							

