APPLICATION FORMAT

Advertisement No.MIL/HR/GA/AOCP/2024/II Batch

(USE CAPITAL LETTERS, LIMIT INFORMATION TO BOXES ONLY) **Affix Latest** NAME OF THE **Passport Size** CANDIDATE Colour Photo 2. **GENDER** (Without Goggles & Cap) 3. DATE OF BIRTH **FATHER'S NAME** 4. MOTHER'S NAME 5. NATIONALITY 6. CATEGORY 7. Aadhar No. 8. **POSTAL ADDRESS** 9. STATE: P.O: PIN: **MOBILE NUMBER** 10. E-MAIL ID 11. 12. TRADE APPLIED FOR MARKS OBTAINED DIVISION NAME OF THE YEAR OF QUALIFICATION UNIVERSITY/ IN PERCENTAGE **PASSING** CGPA OBTAINED INSTITUTE/BOARD EDUCATIONAL 13. IN POINTS QUALIFICATION 1.MATRICULATION 2.AOCP(NTC/NAC) 3. OTHER 14. **DETAILS OF FEE** SUBMITTED (IF APPLICABLE) I hereby declare that the particulars furnished above are complete and correct to **DECLARATION** 15. the best of my knowledge and belief. I understand that if at any stage of the selection process and subsequent to my selection , if it is found that the information given in the application is false or incorrect or if I do not satisfy the eligibility criteria stated in the advertisement/Notification, my candidature/appointment is liable to be cancelled/terminated . Date:_____ Signature:_____ Name of Candidate:

Last date of receipt of completed application: 21 Days from the date of publication in Employment News/Rojgar Samachar.

ENCLOSURE 1.

3. 4. 5.