Format of the Application

1. Name of the Post   :
2. Name of the Applicant (in block letters) :
3. Father's/ Husband's Name:
4. Date of Birth   : Date.........Month……….Year……….
5. Category: SC/ST/BC-I/BC-II/Gen:
6. Address:
   (a) Permanent:

   _____

   _____

   _____

   _____

   (b) Correspondence:

   _____

   _____

   _____

   _____

7. Telephone No. with STD Code _____
8. Mobile No _____

9. Qualification (Attach attested photocopy of certificates):

Sl. No	Educational Qualification	Subject	Name of University	Class/Division	Year
1					
2					
3					
4					
5					
Any other Special Qualification					
1					
2					

10. Declaration by the applicant
*I hereby declare that all the statements made and information provided by me in the Application Form are true. I also understand that in any case, any of these is found false, I shall be disqualified forthwith for the post applied for or my engagement with NSACS shall be terminated forthwith and I shall also be liable for legal action.

Place:………………
Date:………………..   **Signature of the Applicant**