

Date:\_

\_\_ Place:\_

## **Application Form**

No. \_

(For office Use Only)	(For	office	Use	Only)
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Post applied for									,niy) 	Recent Color Photograph		
Nam	Name Applicant											4.5x3.5 cm
		s / Husba		me _								
Date of Birth/ Age Gender												
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Ex Serviceman Date					of Retirement Arms/			/ Service			marks if any	
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		-	ent, the	infori	nation i	s found	d false or in	cor	rect my ap	point	tment m	ay be terminate
with (	out	any notice.							• M			

Signature of Applicant\_