

Application Form

1.Full Name of the applicant:

2.Date of Birth:

3.Address:

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4.Mobile No:

5.E-Mail ID:

6.Educational Qualification: (In case you need more space, kindly attach Separate sheets in the same format)

S. No.	Name of the Degree / Diploma (as printed on Diploma as printed on your certificate)	University/ Place	Duration		Main Courses of Study
			From	To	

7. Brief Service Particulars and Experience: (Starting from the most recent post. In case you need more space, kindly attach sheets in the same format).

Designation	Organisation	Duration		Brief Description of Duties
		From	To	

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8. Additional information, if any, in support of suitability for the post, any other National or State level Recognition/Awards won/ Publications/ Experience/ assignments relevant to the requirements of the post applied.

9.It is Certified that,

- a.The information furnished in the application form and enclosed documents is correct.**
- b.If selected, I shall not hold office of profit or pursue any profession or carry on any business other than my designated position ofat the One Stop Centre.**

Place:

Date:

(Signature of the applicant)

(NOTE: Filled in application with relevant documents duly self-attested to be sent to be below address. Original certificates should not be sent along with the application. The filled application will be submitted to the below address)

ADDRESS:

District Social Welfare Office,

Collectorate Campus,

Tirupattur Dt 635 60