# भारतीय वायुसेना Indian Air Force

# DIRECT RECRUITMENT OF GROUP 'C' CIVILIAN POSTS IN IAF

1. Applications are invited from eligible Indian citizens for the recruitment of following **Group 'C' Civillan posts** at the various Air Force Stations/Units mentioned below. The eligible candidates may address their application to the concerned Stations/Units. The details of the posts are given below:-

| SI  | Postal Address                                                                                                         | Post                                                     | Total No.<br>of Vacancies | Category for which the post should be earmarked |     |     |    |     |      |     |
|-----|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------|-------------------------------------------------|-----|-----|----|-----|------|-----|
| No. |                                                                                                                        |                                                          |                           | UR                                              | овс | sc  | ST | EWS | PwBD | ESM |
|     | Air Officer Commanding                                                                                                 | Cook (Ordinary Grade)                                    | 01                        | 01                                              | -   | -   | -  | -   | -    | -   |
|     | Air Force Central Medical Establishment                                                                                | Mess Staff                                               | 01                        | 01                                              | -   | -   | -  | -   | -    | -   |
|     | Subroto Park, New Delhi- 110010                                                                                        | Multi Tasking Staff (MTS)                                | 01                        | -                                               | -   | -   | -  | 01  | -    |     |
|     | President.                                                                                                             | Hindi Typist                                             | 01                        | -                                               |     |     | -  | 01  |      |     |
|     | Central Airmen Selection Board, Barar<br>Square, Naraina, Delhi Cantt.<br>New Delhi-110010                             | Multi Tasking Staff (MTS)                                | 02                        | 02                                              | -   | -   | -  | -   | -    | -   |
| ,   | Air Officer Commanding                                                                                                 | Multi Tasking Staff (MTS)                                | 01                        | 01                                              | -   | -   | -  | -   | -    | -   |
|     | CSDO, AF Subroto Park,<br>New Delhi- 110010                                                                            | House Keeping Staff<br>(HKS)                             | 01                        | -                                               | 01  | -   | -  | -   | -    | -   |
|     | Air Officer Commanding, Air Force Station<br>Sohna Road, Gurugram-122001                                               | Cook (Ordinary Grade)                                    | 01                        | -                                               | 01  |     | -  | -   | -    | -   |
|     |                                                                                                                        | Multi Tasking Staff                                      | 01                        | -                                               | 01  |     | -  | -   | -    | -   |
|     |                                                                                                                        | Mess Staff                                               | 01                        | 01                                              |     | -   | -  | -   | -    | -   |
|     | The Presiding Officer, Civilian                                                                                        | Hindi Typist                                             | 01                        | -                                               | 01  |     | -  | -   | -    | -   |
|     | Recruitment Board                                                                                                      | Multi Tasking Staff (MTS)                                | 04                        |                                                 |     | 02  | -  | 02  | -    | -   |
|     | (scrutiny of Application) ,<br>Air Force Record Office, Subroto Park,<br>New Delhi-110010                              | House Keeping Staff<br>(HKS)                             | 04                        | 02                                              | 01  |     | -  | 01  | -    | -   |
|     | Air Officer Commanding, Air Force<br>Central Accounts Office, Subroto Park,<br>New Delhi- 110010                       | Lower Division Clerk (LDC)                               | 09                        | 04                                              | 02  | 01  | 01 | 01  | -    | -   |
|     |                                                                                                                        | Multi Tasking Staff (MTS)                                | 01                        | -                                               | -   | -   | -  | 01  | -    | -   |
|     |                                                                                                                        | House Keeping Staff (HKS)                                | 04                        | 03                                              | -   | -   | -  | 01  | -    |     |
|     | 6 Air Force Liasion Unit<br>C/o Air Force Station Kanpur<br>PO - Chakeri, Kanpur, UP-208008                            | Multi Tasking Staff (MTS)                                | 01                        |                                                 | 01  | Z   | -  | -   | -    | -   |
|     | Commanding Officer, 2 Airmen Selection<br>Centre,<br>C/o Air Force Station New Delhi,<br>Race Course, New Delhi-110003 | Hindi Typist                                             | 01                        | 01                                              | •   | 7   | -  | -   | -    | -   |
|     | The Station Commander                                                                                                  | Hindi Typist                                             | 01                        | 01                                              | 1.0 | 7 - | -  | -   | -    | -   |
|     | Air Force Station                                                                                                      | Store Keeper                                             | 01                        | 01                                              |     |     | -  | -   | -    | -   |
|     | Dist - Carnicobar, A & N Islands                                                                                       | Carpenter (Skilled)                                      | 01                        | 01                                              | • / | -   | -  | -   | -    | -   |
|     | PIN-744301                                                                                                             | Painter (Skilled)                                        | 01                        | 01                                              | -   | -   | -  | -   | -    | -   |
|     |                                                                                                                        | Mess Staff                                               | 01                        | 01                                              | ~!  | h   | -  | -   | -    |     |
| 0.  | The Air Officer Commanding                                                                                             | Lower Division Clerk (LDC)                               | 01                        | 01                                              | -   |     | -  |     | -    | -   |
|     | Air Force Station, Race Course<br>New Delhi - 110003                                                                   | Store Keeper                                             | 02                        | 01                                              | -   | 01  | -  |     | -    | -   |
|     |                                                                                                                        | Supdt (Store)                                            | 15                        | 06                                              | 04  | 02  | 01 | 02  | -    | 03  |
|     |                                                                                                                        | Civilian Mechanical Transport<br>Driver (Ordinary Grade) | 03                        | 01                                              | 01  | 01  |    | -   |      | -   |
|     |                                                                                                                        | Cook (Ordinary Grade)                                    | 03                        | 01                                              | 01  | 01  | 7- | -   | -    | -   |
|     |                                                                                                                        | Carpenter (Skilled)                                      | 02                        | 01                                              | 01  |     |    | -   | -    | -   |
|     |                                                                                                                        | House Keeping Staff (HKS)                                | 06                        | 03                                              | 02  | -   | -  | 01  | -    | -   |
|     |                                                                                                                        | Mess Staff                                               | 06                        | 03                                              | 02  | -   | -  | 01  |      |     |
|     |                                                                                                                        | Multi Tasking Staff (MTS)                                | 06                        | 03                                              | 01  | -   | 01 | 01  |      | -   |

Note: The number of vacancies may vary.

Note: UR-Un-reserved, SC-Scheduled Caste, ST-Scheduled Tribes, OBC-Other Backward Caste, PWBD-Person with Benchmark Disabilities, OH-Orthopaedic Handicapped, HH- Hearing Handicapped, VH-Visually Handicapped, EWS-Economy Weaker Section, ESM-Ex-Serviceman.

| *Persons with Benchmark Disabilities (PwBD) |                                                                                                                                                             | (a) Blindness and low vision                                                                                           |  |  |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--|--|
|                                             | (B)                                                                                                                                                         | (b) Deaf and hard of hearing                                                                                           |  |  |
|                                             | (C)                                                                                                                                                         | (c) Locomotor disability including cerebral palsy, leprosy cured, dwarfism, acid attack victims and muscular dystrophy |  |  |
|                                             | (D)                                                                                                                                                         | (d) Autism, intellectual disability, specific learning disability and mental illness                                   |  |  |
|                                             |                                                                                                                                                             | (e) Multiple disabilities from amongst persons under clauses (a) to (d) including deaf blindness                       |  |  |
| Reservation for SC/ST/OBC/EWS/PwBD/ESM      | C/EWS/PwBD/ESM  The persons selected against the quotas reserved for PwBD/ESM also to be adjusted in the post bas roster among UR/SC/ST/OBC/EWS categories. |                                                                                                                        |  |  |

- 2. Age Limit:- For all posts 18-25 years (The crucial date for determining age limit is the last date of receipt of application).
- (a) Age Relaxation: -
- (i) 03 years for the candidates belonging to OBC.
- (ii) 05 years for the candidates belonging to SC/ST category.
- (iii) 10 years for the candidates belonging to Physically Handicapped. (Additional 05 years in case of Physically Handicapped belonging to SC, ST & 03 years for OBC category)
- (iv) Ex-servicemen: Ex-servicemen who have rendered not less than 06 months of continuous service in the Armed Forces shall be allowed to deduct the full period of such service from their actual age and if the resultant age does not exceed the prescribed maximum age by more than three years, they shall be deemed to be within
- (v) SC/ST/OBC candidates applying against UNRESERVED post are not entitled to any relaxation in age limit, experience etc.

(vi) Departmental Employees:-

40 years for UR

43 years for OBC

45 years for SC/ST

Note:- The age relaxation for all eligible candidates is as per prevalent Govt. Instructions.

3. Educational Qualification/Pay Scale for each post:-

| SI.<br>No. | Post                                                     | Pay scale                          | Educational Qualification/Experience                                                                                                                                                                                                                                                                              |
|------------|----------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (a)        | Supdt (Store)                                            | Level-4, as per Pay Matrix 7th CPC | Essential: Graduate of a recognized University or equivalent.  Desirable: Experience in handling Stores and keeping Accounts in a store of a concern of repute in Public or Private sector.                                                                                                                       |
| (b)        | Lower Division Clerk (LDC)                               | Level-2, as per Pay Matrix 7th CPC | 12th Class pass from a recognized Board.  A typing speed of 35 wpm in English or 30 wpm in Hindi on computer (35 wpm and 30 wpm correspond to 10500 KDPH/9000 KDPH on an average of 5 key depressions for each word)                                                                                              |
| (c)        | Hindi Typist                                             | Level-2, as per Pay Matrix 7th CPC | 12th Class pass from a recognized Board.  Hindi Typing @ 30 words per minute on computer corresponding to 9000 KDPH on ar average of 5 key depressions for each word. (Time allowed 10 minutes)                                                                                                                   |
| (d)        | Store Keeper                                             | Level-2, as per Pay Matrix 7th CPC | Essential: 12th Class or equivalent qualification from a recognized Board or University.  Desirable:  Experience in handling Stores and keeping Accounts in a store of a concern of repute in Public or Private sector.                                                                                           |
| (e)        | Civilian Mechanical Transport<br>Driver (Ordinary Grade) | Level-2, as per Pay Matrix 7th CPC | Essential: Matriculation pass or equivalent qualification from a recognized board or university; Must be holding a valid Civil Driving License for light and heavy vehicles; Must possess professional skill in driving and knowledge of motor mechanism; Minimum two years experience in driving motor vehicles. |
| (f)        | Cook (Ordinary Grade)                                    | Level-2, as per Pay Matrix 7th CPC | Matriculation from a recognized board with a certificate or diploma in catering; 1 year experience in trade.                                                                                                                                                                                                      |
| (g)        | Painter (Skilled)                                        | Level-2, as per Pay Matrix 7th CPC | 10th pass from a recognized Board or Institute. Industrial Training Institute Certificate in the trade of Painter from a recognized institute OR Ex-servicemen in appropriate trade viz. Painter                                                                                                                  |
| (h)        | Carpenter (Skilled)                                      | Level-2, as per Pay Matrix 7th CPC | 10th pass from a recognized Board or Institute. Industrial Training Institute Certificate in the trade of Carpenter from a recognized institute OR Ex-servicemen in appropriate trade viz. Carpenter Rigger                                                                                                       |
| (j)        | House Keeping Staff (HKS)                                | Level-1, as per Pay Matrix 7th CPC | Matriculation pass or equivalent qualification from a recognized Board or University.                                                                                                                                                                                                                             |
| (k)        | Mess Staff                                               | Level-1, as per Pay Matrix 7th CPC | Essential: Matriculation pass or equivalent qualification from a recognized Board or University.  Desirable: One year of experience as Waiter or Washer up from an Organization or Institute.                                                                                                                     |
| (l)        | Multi Tasking Staff (MTS)                                | Level-1, as per Pay Matrix 7th CPC | Essential: Matriculation pass or equivalent qualification from a recognized Board or University.  Desirable: One year of experience as Watchman or Lascar or Gestetner Operator or                                                                                                                                |

Note: Nomenclature of the post is subject to change.

### 4. Mode of Selection:

(a) All application will be scrutinised in terms of age limits, minimum qualification, documents and certificates. Thereafter, eligible candidates will be issued call letters for written test

Gardener from an Organization or Institute.

- (b) The eligible candidates will be required to appear for written test. The written test will be based on minimum education qualification.
- (c) Syllabus for written exam :-
  - For LDC: General Intelligence, English Language, Numerical Aptitude, General Awareness
  - > For Stenographers :- General Intelligence & Reasoning, General Awareness, English Language & Comprehension
  - For MTS, HKS, Ayah/Ward Sahayika, Laundryman, Mess Staff & Vulcaniser: General Intelligence & Reasoning, Numerical Aptitude, General English, General Awareness
  - For all other trade/post :- General Intelligence & Reasoning, Numerical Aptitude, General English, General Awareness, Trade/Post related question
- (d) The question cum answer paper will be in English and Hindi.
- (e) The requisite number of candidates will be shortlisted (may be restricted to 10 times of number of vacancies) and called for skill/physical/practical test wherever applicable. Further 100% weightage will be given for written test. The Practical/Physical/Skill test will be of qualifying nature only and marks awarded therein will not be added in total marks while preparing merit list.
- (f) Shortlisted candidates are to bring original certificates, copies of annexure attached with application.
- 5. Last date:- The last date for receipt of Application Form is 30 days from the date of publication of this advertisement in 'Employment News/ Rozgar Samachar'.
- 6. How to apply: Eligible candidates can apply to any of the above Air Force Station of their choice subject to the vacancies and qualifications. Application as per format given under (typed in English/Hindi), duly supported with the following documents is to reach the concerned Air Force Station through ordinary post. Applications sent through Registered Post/Speed Post/Courier will not be accepted.
- (a) All documents in support of Education Qualification, Age, Technical Qualification, Physically Handicapped, Experience Certificate & Caste Certificate (issued by the competent civil authorities in case of SC/ST/OBC candidates) etc to be accompanied with the application should be self attested.
- (b) In case of appointment of OBC candidates against their reserved quota their caste should be listed under Central List of OBCs as candidate belonging to castes listed under Central list only are eligible for appointment to Central Services. The latest rules with regard to creamy layer in OBCs are to be followed. Candidates seeking reservation as OBC is required to submit alongwith application a certificate to the effect that he does not belong to any of the creamy layer.
- (c) In case of ex-serviceman self attested photocopy of discharge book is to be submitted alongwith the application.
- (d) Application form duly typed in English /Hindi with recent photograph (passport size) duly self attested. Any other supporting document (self attested), Self addressed envelope with stamp (s) Rs. 10/- pasted. Address should be typed in English / Hindi. Separate application for each post should be forwarded. Applicants to mention clearly on the envelope "APPLICATION FOR THE POST OF ------- AND CATEGORY------"
- (e) Two passport size photograph (same as fixed on the application form).

Signature of Controlling Officer

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#### 7. General Instructions:-

- (a) Applications received prior to the date of publication of this notification and after closing date will not be entertained and will be rejected. IAF will not be responsible for any kind of postal delay.
- (b) Pre-scrutiny of the application in terms of age limit, minimum qualification, documents and certificates will be carried out by the respective unit before calling the suitable candidates for the written test / skill / practical / physical test. An application can be rejected by the Board without any intimation, if found incomplete/not as per
- (c) The centre for examination/ skill / practical / physical test will be intimated to the candidate in due course. The centre may be different from the place to which the application was sent. This is done purely for administrative convenience.
- (d) NO TA/DA will be paid to attend the written test / skill / practical / physical test.
- (e) Selected candidate will be subject to all India service liability.

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- (f) Merely fulfilling the basic selection criteria does not automatically entitle a person to be called for test / skill / practical / physical test.
- (g) Candidates are to bring original certificates viz. SC/ST/OBC/EWS/PwBD/ESM, educational qualification / technical qualification and experience certificates at the time of the skill / practical / physical test.
- (h) There will be simultaneous conduct of test for all categories. The responsibility of deciding the category for which the candidate would like to appear will be choice of the applicant himself. No separate exam will be conducted for candidates applying for more than one category, if the exams are held on the same date.

#### 8. Covid-19 Instruction:-

- (i) To avoid the risk of Covid-19, candidates are advised to follow all instructions/guidelines issued by Central / State Govt. for preventive of Covid-19 from time to time.
- (ii) At the entrance any candidate showing complaints of influence like illness (ILI), may not be allowed for the test considering the safety of other persons.
- 9. The Air Officer Commanding/Station Commander / Commanding Officer of the concerned AF Station has the right to reject any application without assigning any reason. Similarly, respective Command/Unit has the right to change the number of vacancies / reservation status at any AF Station at any time before selection.

# PROFORMA FOR APPLICATION

| A same of Candidate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | APPL       | CATION FOR THE POST OF                       |                                | in                                | Unit                                   |               |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------|--------------------------------|-----------------------------------|----------------------------------------|---------------|--|--|--|--|
| (in Block latters) (in Block lat | (1)        | Post applied for                             |                                |                                   |                                        | _             |  |  |  |  |
| State   Same                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | (2)        | Name of Candidate                            | tion                           | का अवस                            |                                        |               |  |  |  |  |
| Actable   Acta   |            | (In Block letters)                           |                                |                                   |                                        | Paste a self  |  |  |  |  |
| (attach copy of linin Certificate self attested of School Page and note last date of Page and North's Days Date of Certificate | (3)        | Father's Name                                | 1                              |                                   |                                        |               |  |  |  |  |
| (5) Age as on the last date prescribed for receipt of application Address for correspondence House No/Street/Village Post Office State Pin Code State Pin Code State Pin Code State Pin Code Octave of Code Post Office Distributed Pin Code Octave O | (4)        | Date of Birth                                | :                              |                                   |                                        | Photograph    |  |  |  |  |
| Section   Sect   |            | (attach copy of Birth Certificate self attes | ited )                         |                                   |                                        |               |  |  |  |  |
| Address for correspondence   Address for correspondence   Post Office   Dist                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | (5)        | Age as on the last date                      | : Years                        | Months                            | Days                                   | .             |  |  |  |  |
| House No/Street/Village                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (6)        |                                              |                                |                                   |                                        |               |  |  |  |  |
| Post Office   Dist#   Pin Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            | · · · · · · · · · · · · · · · · · · ·        |                                |                                   |                                        |               |  |  |  |  |
| State Pin Code  House Not/Street/Village Post Office Disit State Pin Code  Caste: Gen/OBC/SC/ST (attato-self attasted cartificate in case of SC/ST/OBC)  (Educational Qualification (attach education certificate self attested)  (10) Any other Qualification/Experience (11) Category for which applied Gen(UR)/OBC/SC/ST/EWS/Ex-Serviceman/Mentonous Sport person /Physically Handicapped (attach self attested copy)  (12) Technical Training/Experience (13) Domicile (attach self attested copy)  (14) Whether registered with any Employment Exchange: Yes/No (if yes, mention Registration No and Name of employment exchange)  (15) I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.  Date:  Signature of candidate  FOR OFFICIAL RECORD ONLY  1. Received on Foreiction: Underage/Overage/incomplete documents/Any other reason to be specified index No:  Date of Test / skill / practical / physical test.  Acknowledgement Card  Post of Address for correspondence (To be filled same as per Column 6 of application form)  House No/Street/Village Pin Code State Pin Code Under No:  Date and Time of Test / skill / practical / physical test.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                              |                                |                                   |                                        |               |  |  |  |  |
| Permanent Address   House No/Street/Village   Post Office   Distt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |                                              | Distt                          |                                   |                                        |               |  |  |  |  |
| House No/Street/Village Post Office Distt State Pin Code Caste: Cen/OBC/SC/ST (attach self attested certificate in case of SC/ST/OBC)  [Studiational Qualification   Full Catabase   Pin Code    [Catabase   Pin Code   Full Catabase   Pin Code    [Catabase   Pin Code   Full Catabase   Ful | _          |                                              |                                | Pin Co                            | ode                                    |               |  |  |  |  |
| Post Office                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | (7)        |                                              |                                |                                   |                                        |               |  |  |  |  |
| State   Stat   |            |                                              |                                |                                   |                                        |               |  |  |  |  |
| (attach self attested certificate in case of SC/ST/OBC)  (attach self attested certificate in case of SC/ST/OBC)  (attach self attested corporation (attach education etrificate self attested)  (Any other Qualification/Experience  (11) Category for which applied (attach self attested copy)  (12) Technical Training/Experience (attach self attested copy)  (13) Domicile (attach self attested copy)  (14) Whether registered with any Employment Exchange. Yes/No (if yes, mention Registration No and Name of employment exchange)  (15) I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.  POR OFFICIAL RECORD ONLY  1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                              |                                | Distt                             |                                        |               |  |  |  |  |
| (attach self attested certificate in case of SC/ST/OBC)  (Bucational Qualification (attach education certificate self attested)  (Any other Qualification/Experience : Gen(UR)/OBC/SC/ST/EWS/Ex-Serviceman/Meritorious Sport person /Physically Handicapped (attach self attested copy)  (12) Technical Training/Experience : (13) Domicile (attach self attested copy)  (14) Whether registered with any Employment Exchange: Yes/No (If yes, mention Registration No and Name of employment exchange)  (15) I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.  Date: Signature of candidate  FOR OFFICIAL RECORD ONLY  1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |                                              |                                | Pin Code                          |                                        |               |  |  |  |  |
| Educational Qualification (attach education certificate self attested)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (8)        |                                              |                                |                                   |                                        |               |  |  |  |  |
| (attach education certificate self attested)  Any other Qualification/Experience  (11) Category for which applied                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |                                              | SC/ST/OBC)                     |                                   |                                        |               |  |  |  |  |
| (10) Any other Qualification/Experience :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (9)        |                                              |                                |                                   |                                        |               |  |  |  |  |
| (11) Category for which applied : Gen(UR)/OBC/SC/ST/EWS/Ex-Serviceman/Meritorious Sport person /Physically Handicapped                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            | (attach education certificate self attested  |                                |                                   |                                        |               |  |  |  |  |
| (11) Category for which applied : Gen(UR)/OBC/SC/ST/EWS/Ex-Serviceman/Meritorious Sport person /Physically Handicapped                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (40)       | A                                            | 9/~                            |                                   |                                        |               |  |  |  |  |
| (attach self attested copy) Technical Training/Experience   Committee   Commit | (10)       | Any other Qualification/Experience           |                                |                                   |                                        |               |  |  |  |  |
| (attach self attested copy) Technical Training/Experience   Committee   Commit | (44)       | Cotonour form bish continu                   | 0///000000000                  | TIFINOIF Condessed Man            | Charles Canal access (Dharically Hand  | d             |  |  |  |  |
| Technical Training/Experience   Domicile   Cattach self attested copy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (11)       |                                              | : Gen(UR)/OBC/SC/S             | ST/EWS/Ex-Serviceman/Mer          | ntorious Sport person /Physically Hand | icapped       |  |  |  |  |
| Comicile   Cattach self attested copy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (10)       |                                              |                                |                                   |                                        |               |  |  |  |  |
| (attach self attested copy)  Whether registered with any Employment Exchange: Yes/No  (If yes, mention Registration No and Name of employment exchange)  I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.    Signature of candidate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |                                              |                                |                                   |                                        |               |  |  |  |  |
| (14) Whether registered with any Employment Exchange: Yes/No (If yes, mention Registration No and Name of employment exchange) (15) I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.    Signature of candidate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (13)       |                                              | -                              |                                   |                                        |               |  |  |  |  |
| (If yes, mention Registration No and Name of employment exchange)  I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.  Date:  Signature of candidate  FOR OFFICIAL RECORD ONLY  1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (1.1)      |                                              | t Evelande: Ves/Ne             |                                   |                                        |               |  |  |  |  |
| I hereby certify that above particulars mentioned in the application are correct and true to the best of my knowledge and belief, if particulars mentioned by me are found false at any stage then I shall be liable to be terminated without any notice.    Signature of candidate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (14)       |                                              |                                |                                   |                                        |               |  |  |  |  |
| me are found false at any stage then I shall be liable to be terminated without any notice.    Signature of candidate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (15)       |                                              |                                |                                   |                                        |               |  |  |  |  |
| Post of  (1) Name (2) Father's Name  (3) Address for correspondence (To be filled same as per Column 6 of application form) House No/Street/Village Post Office State Pin Code  (4) Index No:  Date of Test / skill / practical / physical test.  Post Office Distt State Pin Code  Date of Test / skill / practical / physical test.  Post Office Distt State Date and Time of Test / skill / practical / physical test.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (15)       |                                              |                                |                                   |                                        |               |  |  |  |  |
| FOR OFFICIAL RECORD ONLY  1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            | the are lound laise at any stage them is     | idii be liable to be terriliri | ated without any hotice.          |                                        |               |  |  |  |  |
| FOR OFFICIAL RECORD ONLY  1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Date:      |                                              |                                |                                   | Signature of candidate                 |               |  |  |  |  |
| 1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Dute.      |                                              |                                |                                   | orginature of current                  |               |  |  |  |  |
| 1. Received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |                                              | FOR OFF                        | FICIAL RECORD ONL                 | _Y                                     |               |  |  |  |  |
| 2. Accepted/Rejected                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1.         | Received on                                  |                                |                                   |                                        |               |  |  |  |  |
| 3. Reason for rejection: Underage/Overage/incomplete documents/Any other reason to be specified  4. Index No: Date of Test / skill / practical / physical test.  Acknowledgement Card  Post of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |                                              |                                |                                   |                                        |               |  |  |  |  |
| Acknowledgement Card    Acknowledgement Card   Post of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                              | /incomplete documents//        | any other reason to be spec       | ified                                  |               |  |  |  |  |
| Acknowledgement Card  Post of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |            |                                              | -                              | -                                 |                                        |               |  |  |  |  |
| Post of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 4.         | maex rro.                                    |                                | Date of 10                        | ot / ottil / proceed / priyoledi teot. |               |  |  |  |  |
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| (1) Name :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Post o     | f                                            |                                | <b>3</b>                          |                                        |               |  |  |  |  |
| (2) Father's Name :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            |                                              |                                |                                   |                                        | -             |  |  |  |  |
| (2) Father's Name :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (1)        | Name                                         |                                |                                   |                                        | Donto o colf  |  |  |  |  |
| Address for correspondence (To be filled same as per Column 6 of application form)  House No/Street/Village                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |                                              |                                |                                   |                                        | - ruste a sen |  |  |  |  |
| (3) Address for correspondence (To be filled same as per Column 6 of application form)  House No/Street/Village                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (2)        | Tallet 5 Harris                              |                                |                                   |                                        | _             |  |  |  |  |
| House No/Street/Village                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (3)        | Address for correspondence (To be filled     | same as ner Column 6           | of application form)              |                                        |               |  |  |  |  |
| Post Office                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | (0)        |                                              |                                |                                   |                                        |               |  |  |  |  |
| State Pin Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            | Post Office                                  | Die#                           |                                   |                                        | _             |  |  |  |  |
| (4) Index No:Date and Time of Test / skill / practical / physical test                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                              |                                |                                   |                                        |               |  |  |  |  |
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