То				Dated				
and	I beg to apply for the post o	ase of any false stater	ment I am liable to any	action Government may deem fit				
				Signature of Applicant				
1.	Full name in Capital letters with	addrass: if any surner	no first	Signature of Applicant.				
1.	Fun name in Capital letters with	address, if any suffar	ne mst.					
	Surname							
2.	Date of birth :							
	Year	Mon		Date				
3.	Place of Birth:							
		Police Station	District	State				
4.	Father's/Mother's and Husband		rried female).					
5.	Personal Description :							
	A. Height : B. Colour of Eyes :							
	M	CM						
	C. Colour of hairs:	D. V	isible distinguishing Ma	urks (if any):				
6.	A . Permanent Address in full :	B . Pı	resent Address in full :					
	C. If you have not resided at th address where you have resided	e above address cont		our years, please give the others				
Fre	-	Fo:	А	ddress:				
7.	Reference :							
	Name and address of two responsible in your localities who would be prepared to Vouch							
	A.		B.					
	<u>л</u> .							

STANDARD FORM OF APPLICATION

8. Are you a Citizen of India ? if so, how ? (copy of Citizenship certificate should be enclosed where

necessary):....

Serial No.	Name of Institution and address	Date of entering	Date of le	eaving	Examination Passed	Division	subjects & taken		
1	2	3	4		5	6	7		
1									
2									
3									
4									
5									
10. Community :									
(a) Stat	e your Religion:		(b)	Are you a member of Schedule Caste Schedule Tribe ? Answer 'yes' or 'No' If 'Yes' give particulars supported by a certificate (copy to be enclosed).					
11. Present occupation if any :			12.	Previous appointment held, if any :					
13. Are you a temporary/retrenched personal of a Temporary Department of Government of Meghalaya (Answer 'Yes' or 'No' if 'Yes' give particulars).									
14. Are you a trained in or a member of the National Cadet Corps or Territorial Army ? if so give Particulars				15. Are you married or unmarried ?					

9. Educational and qualification : (please attach copies of certificate Mark sheet etc):

Signature

Note : Particulars are to be filled in below the column in the space provided.