OFFICE OF THE MUNICIPAL COUNCILLORS.

ENGLISH BAZAR MUNICIPALITY, MALDA

RECRUITMENT EXAMINATION, 2014 APPLICATION FORM

[Employment Notice No. 01/EBM-NULM/14-15 dt. DECEMBER, 2014] [Closing date for receipt of Application: the 5th January, 2015]

ROLL NO.		/\\ \\\		Space for pasting recent passport size							
		(i)The candidate is a Application Forma	ne ed F								
(Space for office use)		particulars/documen (ii)If any item(s) of the candidate, he/she she particular item(s) and remain unfilled. (iii)Correction/overwesignature of the candidature of the	ne Id py ve of t	PHOTOGRAPH of the Candidate with his/her full signature thereon.							
1	Name of	of the post applied for [In block Letters]									
2	Name of	the Candidate	First Name			Middle I	Name	Surname			
	(In Block	Letters)									
3	Father's	/ Husband's Name	First Name			Middle I	Name	Surname			
	rather 37	Trasburia 3 Nume									
4	Date of birth		Day			Month		Year			
4 (A)	Age as or	01.07.2014									
	Address 1	or communication	Permanent Address: PIN								
5	Detail is appropria	to be given in the ate box in Block	Address for communication:								
	Letters.		PIN								
			State								
		Mobile No:-									
			e-mail address:-								
6	Tick agai which yo	nst the category to u belong	SC S		ST	OBC-A	A OBC-	-В С	ieneral		
7(a)		of the Sub- block letters]			7(b) Religion			,			
8		emic Qualifications [Self Attested photocopies of certificates/Marks-sheet /age proof & other documents d be attached with the application]									

	Examinations passed Year of passing			Board / Council/Institution/ University				Total marks obtained		% of marks obtained	
9	Are you employed? If yes, please give in details about your employment in the box (below):										
	Name of the employer		Date of joining			Name of post		Whether the job is temporal or permanent			
(i)											
(ii)	Full address of the employer						1				
10	Working Experience (If any) (Mentioned the Post, Year of Experience, Date of Joining & date of Leaving & Others)										
11	(iv) List of documents should be enclosed (Put Tick mark in the Box)										
SI. No.	Documents		Yes	No	SI. No.	Docun	ocuments			No.	
(i)	Proof of age				(IV)	Copy of the Employs Card (if any)	ment	Exchange			
(ii)	Proof of academic Qualifications				(V)	Two copies of recent passport size photograph duly signed					
(iii)	Proof of Experience				(VI)	Two self addresse postage stamp of Rs		•			
(VII)	Proof in support of category (if any)									

DECLARATION

I solemnly declare that (a) all statement made in this application are true, complete and correct (b) original documents will be produced on demand (c) I agree to take the Examination on condition that the Chairman of the Selection Committee, constituted for Englishbazar Municipality may cancel my candidature at any time if I am found ineligible for admission to the Examination.

**I have informed the head of my office or Department in writing that I am applying for this Examination. [Applicable to those who are already employed anywhere. Please strike out if not applicable]

Place.	
Date.	
	Full signature of the Candidate