FORMAT OF APPLICATION

Note:	All the docum	nents attach	ned shall be	signed by	the applicant	and page nu	ımbered.	
1.	Post for which applied	11						
2.	Name in Block letters						Space for	
3.	Fathers Name							
4.	Permanent address Village/Town/Mohalla					Phot	ograph	
	TehsilDistrict					duly	attested	
	BPOPin CodeBlock							
5.	Present address for co							
6.	Date of birth as per th							
7.	Reserved category (if any)							
8.	Qualification							
9.	Details of academic q	ualification:-						
Sec. of	Examination	Year of	Max	Marks	% of	Div/		
S. No.	Passed	Board		Marks	obtained	Marks	Grade	
1.	Passeu	Doard	passing	IVIALKS	obtained	IVIATES	Grade	
2.								
10.	Details of certificates/		to all and					
10.				(V== /NI=)				
	(i) D.O.B Certificate(Yes/No)							
	(ii) P.R.C(Yes/No)							
	(iii) Qualification Certificate(Yes/No)							
	(iv) Reserved Cate	egory Certifi	cate	(Yes/No)			
11.	Total number of page	5						
	, ,				c:			
					Signati	are of the	applicant.	
Date_								
Place	s							
-			DECLA	RATION	l			
ř.			10		R/O			
Toshil	District	do h	erehy solemn	ly affirm and	declare that the	entries made	herein above	
in the an	oplication form are true	and correct t	o the best of i	ny knowledo	re and helief and r	nothing has be	en concealed	
	undertake that if any							
	at any stage I shall be					ion in the abo	re application	
10.1041.14	,					ire of the	applicant.	
					1.00	are or time	аррисана	
		F	OR OFFICI	E USE ON	LY			
Receive	d application under S	.Noas	per the appli	cation Recei	pt Register main	tained in this	office.	
Dated:								
							Receipt Clerk	
						State M	otor Garages	
		State Mo	tor Garage	es Depart	tment J&K			
				EIPT				
Receiver	d application under S.N	lo as no			egister maintaine	d in this office	From	
	application under 5.N		a trie applicati	on receipt K	egistei maintainei	a in this office	110111	
Dated:								
Juccu							Receipt Clerk	

State Motor Garages