

APPLICATION FOR THE POST OF ANGANWADI HELPER

1. Name of the District _____
- 2 Name of the ICDS Project _____
3. Name of the Anganwadi Centre _____
4. Name of the Candidates _____
(In block letter)
5. Father's name _____
6. Marital Status (Married/Unmarried) _____
7. Husband's Name (in block letter) _____
8. Place of permanent residence
Mohalla _____ Village/Town _____
Panch Constituency _____ Panchayat _____
Hamlet/Ward _____ Teh. _____
9. Address for correspondence _____

Space for
Photograph
Attested by
Gazetted Officer

10. Date of Birth

D	D	M	M	Y	Y	Y	Y

11. Age as on 1-1-2015 _____

12. Academic Qualification

S. No	Exam passed	Board	Year of passing	Marks obtain	Maximum marks
1	Middle				
2	Matriculation				

13. Experience if any _____

14. Documents attached:-

- a) Permanent residence certificate _____
- b) Category certificate _____
(Please Specify).
- c) Proof of residence in the concerned ward/Hamlet _____
- d) Qualification Certificate along with mark sheet. _____
- e) Age Proof _____
- f) Experience if any _____
14. Number of enclosures attached _____

UNDERTAKING

I _____ W/O, D/O _____ R/O _____ do hereby certify that the contents of the application given above are correct and true to the best of my knowledge and belief In case found false the selection committee shall have the right to reject my application.

Signature of Candidate