

NATIONAL INSTITUTE OF PUBLIC COOPERATION & CHILD DEVELOPMENT
5-Siri Institutional Area, HauzKhas, New Delhi-110 016

Application form

Recent Passport size
Photograph

1	NAME OF THE POST APPLIED FOR	:	
2.	Full Name (in Capital letters)	:	
3.	Father's Name	:	
4	Mother's Name	:	
5.	Husband's Name (In case of female married candidates)	:	
6.	Nationality	:	
7.	(a) Address for communication	:	
	(b) Permanent Address	:	
		:	
	(c) e-mail ID	:	
	(d) Mobile phone No.	:	
	(e) Telephone No.	:	
8.	Date of Birth (DD/MM/YYYY)	:	
9.	Age as on the date of last date of receipt of application	:	
10.	Category (SC/ST/OBC/GEN/PH) (Certificate obtained from Revenue Official not below the rank of Deputy Tahsildar4 / Competent Medical Authority in case of PH should be attached as evidence)	:	

11.	Details of Educational Qualifications					:
Exam Passed	Institution/University	Subject studied	Duration of Study	Year of Passing	% of marks	
12.	Details of Professional / Technical Educational Qualifications					:
	Additional Sheet may be added, if required.					
Exam Passed	Institution/University	Subject studied	Duration of Study	Year of Passing	% of marks	
13.	Details of Experience (Candidates are advised to fill-up this column carefully and in terms of conditions stipulated in the Advertisement to avoid rejection) Additional sheet may be added, if required.					
Name of Organization	Post held	Pay Scale	Duration of Service		Nature of appointment whether regular/ adhoc/full time/part time	Remarks
			From	To		

14.	Have you ever been imposed any penalty. if yes please give details					
15	If any departmental inquiry pending or contemplated against you. If yes please give details					
16.	Application Fee: a) Amount of Demand Draft b) DD Number & Date c) Drawn on (Drawer Bank) & Place					
17.	Any other relevant information which you would like to mention in support of your suitability for the post applied for:					
18.	DECLARATION: (i) I hereby declare that I fulfill the eligibility conditions as per the advertisement and that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage or not satisfying the eligibility conditions according to the requirement mentioned in the advertisement, my candidature / appointment is liable to be cancelled / terminated. (ii) I have enclosed the required attested copies of the certificates.					

Place :

Date :

Signature of the Applicant

NATIONAL INSTITUTE OF PUBLIC COOPERATION AND CHILD DEVELOPMENT
5, SIRI INSTITUTIONAL AREA, HAUZ KHAS, NEW DELHI – 110016

Application form for availing the facility of SCRIBE by candidates who are visually handicapped
with visual disability of 40% and above.

I. Details of Candidate

1. Name of the Candidate: _____

2. Nature of Physical disability: _____

3. Are you visually handicapped with visual disability of 40% and above. Yes No

(Enclose a self attested copy of the disability certificate)

Affix a self-attested recent passport size coloured photograph

II. Details of SCRIBE

1. Name of the SCRIBE: _____

2. Date of Birth (DD/MM/YYYY): _____

3. Identification Mark: _____

4. Highest educational qualification
obtained by the SCRIBE: _____

5. Address of the SCRIBE: _____

6. Signature of the SCRIBE:

Affix a recent passport size coloured photograph of the Scribe, attested by the Candidate

Declaration

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that the NIPCCD may cancel/ terminate my candidature. Appointment in case any information given in this application form is found to be false or incorrect at any time. I further declare that the Scribe whose particulars are given above fulfils the criteria for engagement of Scribe prescribed by NIPCCD. I further declare that I have not submitted more than one application for availing the facility of a Scribe. I also understand that NIPCCD shall not bear any expenses or have any liability towards engagement of the aforesaid Scribe by me.

Signature of the Candidate