

**Format**  
**Application Form**

(separate applications are to be filled up for each post)

**Application Number :**

**Post applied for :**

1. **Assistant**
2. **Assistant Librarian**
3. **Cashier**
4. **Translator**
5. **Jr. Translator**
6. **Typist**

1. Name of the applicant (in capital letters): \_\_\_\_\_
2. Father's/Husband's name (tick whichever applicable) : \_\_\_\_\_
3. Address for communication with Pin Code: \_\_\_\_\_  
\_\_\_\_\_

4. Permanent Address with Pin Code : \_\_\_\_\_

5. Date of Birth: Date.....Month.....Year.....
6. Age(as on 01.08.2018): Year.....Month.....Date.....
7. Place of Birth: \_\_\_\_\_
8. Nationality: \_\_\_\_\_
9. (a) Mobile No.: \_\_\_\_\_  
(b) Email ID : \_\_\_\_\_

10. Educational & Professional Qualifications:

Examination Passed	Name of Board/University	Year of passing	% of marks	Class/Division

11. Special qualification, if any: \_\_\_\_\_  
\_\_\_\_\_
12. Work Experience (if applicable) : \_\_\_\_\_  
\_\_\_\_\_
13. Typing knowledge for Post Code 06 only (tick whichever applicable) :
  - a. English only
  - b. English & Hindi both

14. Category (please Tick)
- a. UR:
  - b. B.C-I :
  - c. B.C.-II :
  - d. S.C.:
  - e. S.T.:

15. Sex (please specify): .....

16. Whether handicapped, if yes tick the type and mention the % of disability :-

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- a) blindness or low vision
  - b) hearing impairment
  - c) locomotor disability or cerebral palsy

17. Whether presently serving in any Govt. Institution/ Undertaking (Yes/No):

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If yes,

- a) Name of Department/Institution:
- b) Name of Post held:
- c) Since:

18. Fee Details (Transaction Id/ Reference No./ Amount of Fee paid/ Paid On : \_\_\_\_\_)

19. Documents uploaded

Name of the document – Matriculation Certificate/ Graduation degree certificate/ Certificate showing knowledge of working on computers i.e. DCA/ DCA+ of at least 6 months duration (if applicable)/Typing Certificate showing typing speed of minimum 40 words per minute in English (if applicable)/ Typing Certificate showing typing speed in Hindi (if available)/ Caste Certificate showing the place of residence (if applicable)/ Disability certificate (if applicable)/ Certificate showing achievement in sports (if applicable)

### **Declaration**

It is hereby declared that the information furnished by me herein above is true to my personal knowledge and belief. It is also declared that neither Criminal case is pending against me nor I have ever been punished by any Court of law, nor I am involved in or related with any Criminal case for any offence involving moral turpitude. I know that if anything stated herein above turns out to be false, the High Court of Jharkhand may cancel my candidature at any stage of selection process and may debar me from appearing in the examination at its sole discretion. I further declare that if I obtain appointment on any false or incorrect information, my appointment shall be terminated/ cancelled and I shall be liable for prosecution under the Law.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

**Signature of Candidate**

**APPENDIX - I**

**Detail of Shrutilekhak / Scribe**

1. Name of Applicant \_\_\_\_\_
2. Roll No. - \_\_\_\_\_
3. Type and percentage of disability –
4. Name of the Examination Centre –
5. Examination Room No. - (do not fill it)
6. Name of Shrutilekhak / Scribe –
7. Name of Father / Husband of Shrutilekhak / Scribe –
8. Address of Shrutilekhak / Scribe
9. Date of birth of Shrutilekhak / Scribe –
10. Educational qualification of Shrutilekhak / Scribe :-

<b>Name of Examination or Course</b>	<b>Stream</b>	<b>Year</b>	<b>Passed / Studying</b>	<b>Class/ Division And % of marks</b>	<b>Name of the Board/ University</b>

I \_\_\_\_\_ Certify that the Shrutilekhak / Scribe Mr. / Mrs. / Ms. \_\_\_\_\_ is only 12<sup>th</sup> / Intermediate passed and he / she is not my closed relative. I know that if anything stated herein above turns out to be false, the High Court of Jharkhand may cancel my candidature at any stage of selection process and may debar me from appearing in the examination at its sole discretion. Further, I know that if I obtain appointment under these Rules, based on any false or incorrect information, my appointment shall be terminated / cancelled and this may also entail my prosecution under Criminal/Penal Laws.

Signature of Shrutilekhak/ Scribe

Signature of the Candidate

Signature of Invigilator

Signature of Examination Superintendent