

**APPLICATION FORM FOR THE POST OF SI(MASTER)/ SI(ENGINE DRIVER)/  
SI (WORKSHOP)/ HC(MASTER) / HC(ENGINE DRIVER) / HC (WORKSHOP)/CT (CREW)  
IN BSF WATER WING EXAMINATION-2020**

(This form should be filled in by the candidate in his own handwriting which should be completed in all respects alongwith self-certified copies of testimonials. A copy of recent passport size photograph should be pasted on the application at the space provided for the purpose. Incomplete application will not be entertained and will be summarily rejected. Answer must be given in words and not by dashes and dots).

**REGISTRATION NO.** \_\_\_\_\_ **(To be filled by office)** **ROLL NO.** \_\_\_\_\_

**(TO BE FILLED BY CANDIDATE)**

**POST APPLIED FOR :** \_\_\_\_\_ (Only one post)

**Trade :** \_\_\_\_\_ (Applicable only for the post of HC (Workshop))

**Centre :** \_\_\_\_\_ **Centre Code** \_\_\_\_\_

Paste here recent  
passport size  
(Approx 3.5 x4.5  
Cms) self attested  
photograph

1. Full Name : \_\_\_\_\_  
(In Capital letters)  
(as recorded in Matriculation  
or equivalent certificate)
2. Aadhaar Card/ID Card Number : \_\_\_\_\_  
(If the candidate has Aadhaar number, then provide the Aadhar number. If he does not have the Aadhaar number, then other option e.g. number of PAN card, Driving License, Voter ID etc. will be required to be provided. Copy of Aadhaar card or other Identity card number as mentioned above may be enclosed with this Application Form. Candidate should bring same original card with him at the time of recruitment exams)
3. Father's name : \_\_\_\_\_  
(In Capital letters)
4. Address for Correspondence : \_\_\_\_\_  
(With details of Police Station  
& PIN)  
Mobile Number : \_\_\_\_\_
5. Permanent Address : \_\_\_\_\_  
(With details of Police Station  
& PIN)  
Mobile Number : \_\_\_\_\_  
Email Address (If any) : \_\_\_\_\_
6. Nationality : \_\_\_\_\_
7. Religion : \_\_\_\_\_
8. Category : \_\_\_\_\_  
(UR/EWS/OBC/SC/ST)
9. Gender : \_\_\_\_\_
10. Marital Status : \_\_\_\_\_
11. Visible Identification Marks : i) \_\_\_\_\_  
ii) \_\_\_\_\_



12. Date of Birth(According to Christian Era as recorded in the Matriculation or Equivalent certificate) : In words \_\_\_\_\_  
: In Figures \_\_\_\_\_

13. Educational Qualification : \_\_\_\_\_

14. Details of examinations passed from Matriculation/School leaving certificate and onwards:

Name of School	Name of recognized University/Board of Examinations	Examination passed (i.e Matric/10+2/ Graduation etc)	Year	Division/Class obtained	Percentage of marks obtained

15. a) Whether Ex-Serviceman : YES / NO (Tick )  
b) If so, mention following details (Attach copy of discharge certificate) :-

Date of enrolment	Date of retirement/ discharge	Total length of service	Medical Category	Reasons for release/discharge

16. Technical qualification : \_\_\_\_\_  
in respect to the post applied for

17. Experience : \_\_\_\_\_  
(Experience Certificate be attached with the application)

18. State if you are employed (Yes/No) \_\_\_\_\_

- a) Name and address of Deptt \_\_\_\_\_  
b) Designation held \_\_\_\_\_  
c) Whether holding Permanent \_\_\_\_\_  
Or Temporary post (NOC be attached with the application form)

19. DD/IPO Number, date & amount : \_\_\_\_\_

20. List of enclosures : \_\_\_\_\_

21. **DECLARATION**

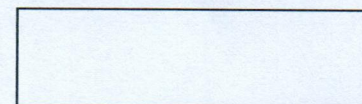
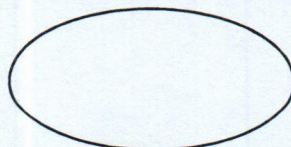
"I.....Son of Shri .....Age.....yrs District .....State.....hereby declare that the information given above and in the enclosed documents is true to the best of my knowledge and belief and nothing has been concealed therein. I am well aware of the fact that if the information given by me is proved not true, I will have to face the consequence as per the Law. Also, all the benefits availed by me shall be summarily withdrawn.

Left Thumb impression of Applicant

Signature of Applicant

Date : .....

Place : .....



(Unsigned application will be rejected)

**NOTE:-**

- i) The candidate shall produce the original certificates at the time of documentation in 2<sup>nd</sup> phase of exam. Non production of certificates shall render rejection of candidature.  
ii) Candidate in service must submit their application through proper channel with the certificate duly signed by their employer stating their willingness to release them from service in BSF in case they are selected.



**Government of India  
Ministry of Home Affairs  
Directorate General Border Security Force**

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IN BSF WATER WING EXAMINATION-2020**

(To be filled by office)

Registration No. \_\_\_\_\_

Roll No. \_\_\_\_\_

**ADMIT CARD FOR WRITTEN EXAMINATION**

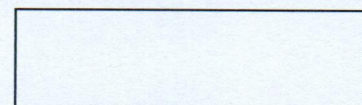
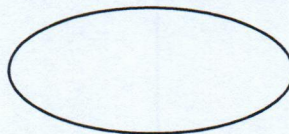
(To be filled by candidate)

1. Full Name  
(in Capital letters)  
(as recorded in Matriculation  
Or equivalent certificate) : \_\_\_\_\_
2. Father's name : \_\_\_\_\_
3. Date of Birth : \_\_\_\_\_
4. Address for Correspondence  
with contact number : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Category (Gen/EWS/OBC/SC/ST) : \_\_\_\_\_
6. Personal mark of Identification : i) \_\_\_\_\_  
: ii) \_\_\_\_\_
7. Applied for the post of : \_\_\_\_\_
8. Trade : \_\_\_\_\_  
(Applicable only for the post of  
HC (Workshop))

Paste here a copy  
of your recent  
passport size  
photograph  
(Approx 3.5 x 4.5  
Cms)

**Left Thumb impression of Applicant**

**Signature of Applicant**



(For Office use only)

8. Reporting Date & Time of Examination : \_\_\_\_\_
9. Examination Centre : \_\_\_\_\_  
\_\_\_\_\_

Date	Signature	Signature of invigilator



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Roll No. \_\_\_\_\_

(To be filled by office)

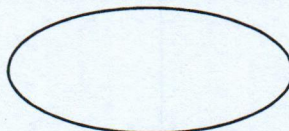
**ADMIT CARD FOR SECOND PHASE EXAMINATION I.E. DOCUMENTATION, PST/PET, TRADE  
TEST AND MEDICAL EXAMINATION**

(To be filled by candidate)

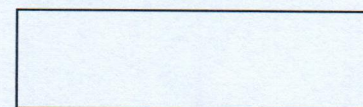
1. Full Name  
(in Capital letters)  
(as recorded in Matriculation  
Or equivalent certificate) : \_\_\_\_\_
2. Father's name : \_\_\_\_\_
3. Date of Birth : \_\_\_\_\_
4. Address for Correspondence : \_\_\_\_\_  
with contact number : \_\_\_\_\_  
: \_\_\_\_\_
5. Category (Gen/EWS/OBC/SC/ST) : \_\_\_\_\_
6. Personal mark of Identification : i) \_\_\_\_\_  
: ii) \_\_\_\_\_
7. Applied for the post of : \_\_\_\_\_
8. Trade : \_\_\_\_\_  
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HC (Workshop))

Paste here a copy  
of your recent  
passport size  
photograph  
(Approx 3.5 x 4.5  
Cms)

Left Thumb impression of Applicant



Signature of Applicant



(For Office use only)

8. Reporting Date & Time of Examination : \_\_\_\_\_
9. Examination Centre : \_\_\_\_\_  
: \_\_\_\_\_



**ANNEXURE-'B'**

**FORMAT OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES  
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri / Smt. / Kum. \_\_\_\_\_ Son / Daughter of  
Shri/Smt. \_\_\_\_\_ of Village/Town \_\_\_\_\_ District/Division  
\_\_\_\_\_ in the \_\_\_\_\_ State belongs to the \_\_\_\_\_  
Community which is recognized as a backward class under the Government of India, Ministry  
of Social Justice and Empowerment's Resolution No.  
\_\_\_\_\_ dated \_\_\_\_\_. Shri/Smt./Kumari \_\_\_\_\_ and/  
or his/her family ordinarily reside(s) in the \_\_\_\_\_ District/Division of the  
\_\_\_\_\_ State/Union Territory. This is also to certify that he/she does not  
belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Scheduled to  
the Government of India, Department of Personnel & Training O.M. No. 36012/22/93-Estt  
(SCT) dated 8.9.1993\*\*.

District Magistrate

Deputy Commissioner etc.

Dated:

Seal:

\* The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate's is mentioned as OBC.

\*\* As amended from time to time.

Note : The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.



**DECLARATION BY OBC CANDIDATE REGARDING NON-CREAMY LAYER STATUS**

I, \_\_\_\_\_ Son of Shri \_\_\_\_\_ resident of  
village/town/city \_\_\_\_\_ district \_\_\_\_\_ State \_\_\_\_\_  
hereby declare that I belong to \_\_\_\_\_ community which is recognized  
as a backward class by the Government of India for the purpose of reservation in services as  
per orders contained in DOP&T OM No. 36012/22/93-Estt. (SCT) dated 08.09.93 and  
amended from time to time. It is also declared that I do not belong to persons /sections  
(**Creamy Layer**) mentioned in column 3 of the Schedule to the above referred Office  
Memorandum dated 08.09.93 and amended from time to time.

**Signature of the applicant (OBC Candidate)**