

MSE - 2019

APPLICATION FORM FOR THE POST OF MULTI SKILLED EMPLOYEE(MSE) NOTIFIED VIDE NOTIFICATION FILE NO 12/44/2019- SERVICES(2) DATED 21.10.2019

(To be filled in capital letters with ball pointed pen only)

(FOR OFFICE USE ONLY)

Date of receipt of application	
Roll number	
Remarks if any	

Affix a recent
passport size
photograph.

(Self attested)

(TO BE FILLED BY CANDIDATE IN BLOCK LETTERS)

1.	Name of the applicant (As per School Certificate in Block Letters)	:	
2.	Name of Father/ Mother	:	
3.	Date of Birth and Age as on 22.11.2019 (As per School Certificate/ Birth Certificate)	:	
4.	Whether claiming age relaxation (Yes/No)	:	
5.	If Column No. 4 is 'Yes', please indicate the category under which age relaxation is claimed. ST/Ex-Service men/ Persons with disability	:	
6.	Whether Differently Abled (Yes/No)	:	
7.	If Column No. 6 is 'Yes', please indicate Nature of disability including (%) (To be filled by person with disability only; others may indicate as N.A.)	:	
8.	Community (ST/Others)	:	
9.	Nativity (District & State)	:	
10.	Whether the applicant is a Local Candidate of Lakshadweep (Yes/No)	:	
11.	Whether Lakshadweep Government Employee (Yes/No)	:	
12.	If Column No. 11 is 'Yes', please submit the application through proper channel	:	
13.	Whether the applicant has attained the Essential qualification prescribed in the Employment Notice for the post (Yes or No)	:	
14.	If Column No. 13 is 'Yes', please furnish,		
	(a) Name of the Institution & Board	:	
	(b) Year of Pass	:	

15.	Permanent address (Including e-mail ID and Contact Number)		
16.	Address for Communication (including e-mail ID and contact number)	:	
17.	Centre for Examination: (Kavaratti/ Agatti/ Amini/Androth/ Chetlat/Kadmat/ Kalpeni/ Kiltan/ Minicoy/ Kochi)	:	

18. Declaration:

I certify that the information furnished above are true and correct to the best of my knowledge and belief. If any of the information furnished above is found to be incorrect/doctored/false at any point of the recruitment process, my candidature shall be liable to be rejected, irrespective of the result of the examination.

Place:

Date:

Name & Signature:

NOTE: The cover containing application should be super scribed “**Application for the post of MSE-2019 vide notification dated 21.10.2019**” and should be addressed to **The Director(Service), UT of Lakshadweep Administration, Secretariat, Kavaratti-682555** and should reach **on or before 6.00 PM on 22.11.2019**. The Service Department, UTL Administration will not be responsible for any Postal delay.