

APPLICATION FORM FOR RECRUITMENT

**LATEST
PHOTOGRAPH**

Name of Post Applied for _____ BPS _____

Name (In Capital letters) _____

Father's Name _____

Date of Birth (dd-mm-yyyy) _____ Gender _____ Religion _____

Domicile _____ Tele No. _____ Mobile _____

Postal Address _____

Educational Qualification _____

Experience: Department _____

Designation _____ Duration _____

Declaration: I certify that all information, provided by me, in this application form is true and correct to the best of my knowledge and belief.

Date _____

Signature _____