GOVERNMENT OF PUDUCHERRY DEPARTMENT OF WOMEN AND CHILD DEVELOPMENT

PROFORMA OF APPLICATION FOR THE POST OF CHAIRPERSON / MEMBERS IN THE U.T. OF PUDUCHERRY COMMISSION FOR PROTECTION OF CHILD RIGHTS, PUDUCHERRY

POST APPLIED FOR	:		
01) Name in Block letters	:		Passport size photo
02) Father/Husband's Name	:		Size prioto
03) Date of birth	:		
04) Age (as on 26 th June, 2020)	:		
05) Sex	:	Male / Female	
06) Nativity	:		
07) Nationality	:		
08) Caste	:	BC/MBC/SC/ST/Othe	ers
09) Address for communication	:		
10) Telephone No	:		
11) Email ID	:		
12) Educational qualification (with certificates)	:		
13) Field of achievement	:		
14) A brief life – sketch of the individual			
including press clippings/certificates etc	:		
15) The performance of the individual			
Adjudged as exceptional for promoting			
the Welfare of Children	:		
16) Any other relevant information	:		
DECLARATION			
I hereby declare that all the statements made in this application			
are true, complete and correct to the best o	f my kn	owledge and if any o	of the above
given information being found false or incorrec	ct or inel	igible and detected be	efore or after
selection, I hereby convey my consent for o	ancellat	ion of my candidatur	e. Further I
declare that, I have gone through all the terms	and cor	nditions of appointmer	nt I will abide
the same.			
Place:			
Date:			

Signature of the Candidate