

**OFFICE OF THE CHIEF REGISTRAR OF BIRTHS & DEATHS &
DIRECTORATE OF HEALTH SERVICES, ASSAM
HENGRABARI, GUWAHATI-36.**

APPLICATION FORM

APPLICATION FOR THE POST OF: _____

Affix a recent self attested passport size photo
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1. Name:
2. Sex:
3. Date of Birth: DD/MM/YYYY (in words)
4. Age as on 01.10.2013 ___ Years ___ Months ___ Days
5. Father/Husband's Name:
6. Mother's Name
7. Permanent Address:

8. Correspondence Address:

9. Contact No.: Mob-
10. E-mail address
11. Are you conversant with Hindi/English & local Language of the State: Yes/No
12. Are you conversant with basic computer knowledge: Yes/No
13. Educational Qualifications (attach self-attested copy of the documents in support):

Exam Passed	Institute/University/ Board	Subjects Offered	Passing Year	Marks Obtained (%)
Post Graduate				
Graduate				
Intermediate				
High School				
Others (if any)				

14. Professional Qualification (if any):
15. Details of Employment (in chronological order):

Name of the post and employer	From	To	Basic/ Total pay	Nature of appointment i.e. whether ad hoc or regular	Nature of duties (in brief)

16. Category: GEN/SC/ST/OBC
(in case of belonging to SC/ST/OBC enclose the necessary document in support)

17. Whether you are ready for the field visits during the tenure: Yes/No

18. Write 8 preference (s) of the districts for posting (in case of Data processing Assistant):

1. 2. 3. 4. 5. 6. 7. 8.

I have carefully gone through the vacancy circular/advertisement and I am well aware that the Curriculum Vitae duly supported by documents submitted by me will also be assessed by the Selection Committee at the time of selection for the post. It is certified to the best of my Knowledge and belief; I bear a good moral character and have no antecedents. The post is purely on short term contract basis and I will not be entitled to any claims, rights, interests or further benefits in terms of regularization or consideration of further appointment to any post, including any claims for any casual, ad-hoc, temporary or regular service in the Government.

Place:

Date:

Signature of the candidate