Last date of submission of application: 7<sup>th</sup> October, 2015

# APPLICATION FORM FOR PRE-RECRUITMENT COACHING FOR UN-EMPLOYED ST YOUTHS FOR VARIOUS COMPETITIVE EXAMINATIONS UNDER SPECIAL PACKAGE FOR THE YEAR 2015-16.

#### Part-I

(To be filled by the candidate)

Please fix here recent photograph with self attested

To
The Director,
Directorate of Welfare for Sch. Tribes,
Government of Tripura,
P.N.Complex, Gurkhabasti, Agartala.

Sub: Application for pre-recruitment coaching for various competitive examinations during the year 2015-16.

Sir,

I would like to join in the pre-recruitment coaching classes sponsored by the Tribal Welfare Department, Government of Tripura under Special Package for the year 2015-16. I am also furnishing herewith necessary particulars in Part-I, Part-II & Part-III in support of selection.

I would, therefore, request you to kindly consider my application and give me the opportunity for imparting coaching for the aforesaid year.

Yours faithfully,

Enclo: As stated above.

Date:

Place: (Full Signature of the applicant with address)

NB: Application to be submitted to the concerned Course Coordinator. Please collect acknowledgement number after submission of the application.

(Office use only)

Application No.	T	W					
Date of receipt				2	0	1	5

Name of the Center:

(Signature with seal of the Course Coordinator)

#### Part-II

## (To be filled by the candidate)

1	Full name (in block letter)							
2	Sex (Plz. tick in appropriate box)	Male		Female			Others	
3	Fathers/Husbands name		•		•			
		Village						
4		Post Office						
	Permanent address	Police Station						
		Pin						
		ROR No						
5		Village						
	Duescout adduesc	Post Office						
	Present address	Police Station						
		Pin						
	Cont Contistent	Whether the applicant belongs to			ST			
6	Cast Certificate	Name of the Ti	ribe (C	ommunity)				
7	Occupation	Student		Un-emp	ployed		Employed	
,	(Plz. tick in appropriate box)	Student		on employed		2 0		
8	Name of the course applied for	Group-A services		Group-B Services		Other than Govt. Services		
	(Plz. tick only in one box)						Services	
9	Name of the University with							
	Registration No. (for Degree Course only)  Educational Qualification						0.1	
10	(Graduation Level)	Science		Arts	Commerce		Others (Pls. specify in	
10	(Plz. tick in appropriate box)	Belefice	Arts		Commi	CICC	details)	
	(1 E. tiek in appropriate box)				Percentage		,	
	Details of marks in Degree course	Total Marks M		s obtained	of Marks		Division/Grade	
11	(Plz. write in the respective box)							
12	AADHAR No.							
13		Name of Bank		1.4/0.1/			, mass s	
	Details of Bank A/C			k A/C No	Branch		IFSC Code No	
	(Plz. write in the respective box)							
		Land Line	Land Line		Fax	ζ	Email	
14	Contact Number of the candidate			Mobile	- L W	-	2211011	
	(Plz. write in the respective box)							

## Signature of the applicant

#### N.B:- Filling up all the columns are mandatory.

Group-A services consist of both Central & State including combined Civil Services. Group-B Services consist of both Central & State including Public Service Commission examination. Other than Govt. Services including Banking & PSU Sector.

## **List of enclosures:-**

- A. Self attested copy of the applicant's permanent certificate.
- B. Self attested copy of the applicant's nationality certificate.
- C. Self attested copy of the applicant's last examination marks sheet.
- D. Self attested of the applicant's caste certificate.
- E. One copy of passport size photograph with signature of the applicant.
- F. Bank Pass Book Xerox copy.
- G. AADHAR number copy.

# Part-III

# **Declaration**

(To be signed by the applicant in presence of Gazette Officer)

I Shri / Smt					S/O, D/O, H/O						
P.O			P	/S		0	f	•••••		District,	
do hereby	declare	and aff	irm that t	he particulars	given ii	n Part II	of this for	m are	true to	the best of	
my knowledge and belief and in case any of the particular furnished is found to be false at any											
subsequen	it stage, I	shall b	e bound t	to refund the er	ntire co	urse fee v	which was	spent	in favo	ur of me to	
the Govern	nment.										
					Signature of the applicant In presence of Gazetted Officer						
Certified	that	the	above	declaration	has	been	signed	by	the	applicant	
Shri /Smt.					•••••			•••••	in my	y presence.	
Date :				Signature:							
Pla	ace:				Nam	e :					
110											