BIO-DATA FORM "WALK-IN-EVALUATION & SKILL TEST"

Paste self-attested Pass photo

Date: September 27, 2023

Name	First	Middle	Last			
Father's / Husband's Name	First	Middle	Last			
Date of Birth (DD/MM/YYYY)						
Age as on reporting date of "Walk-In-Evaluation & Skill Test" (i.e. September 27, 2023)	YearMonth Days					
Gender:	Male/Female/Transgender					
Category (Strike out which is not applicable)	i. Gen/SC/ST/ OBC/ EWS ii. PwD/Ex-Serviceman/Others					
Marital Status						
PAN No. / Aadhar No.						
Whether any Court case Pending against your name? If yes, provide the details						
House No. / Street						
Village/ Town/ Police Station/Tashil/ District						
State & PIN Code						
Mobile No. & Email						

Work Experience (if any)							
Organization name	Designation	Job responsibilities	Duration of work (From-To) (In MM-YY format)	No of years and month	Enclosure No.		

(Please enclose separate sheet if the space is insufficient to provide the entire details)

<u>Declaration:</u> I hereby undertake that I am applying for the position of	on Institute
Contract after fully understanding and agreeing to all terms & conditions mentioned in the	e "Walk-In- Evaluation & Skill
Test" advertisement no. NT-05/2023 (Contract) dated September 27, 2023 and the detail	Is furnished above are true to
the best of my knowledge and belief. I shall be personally held responsible for submis	ssion of false information and
suppression of material facts.	
	Signature of the applicant
Name in full (in Capital letters):	
Date:	
Place:	

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