

## APPLICATION FORMAT

(To be filled up by the candidates own hand writing)

*Affix Recent  
Passport size  
photograph duly  
attested on photo by  
the applicant*

To  
The Secretary, DH & FW Samity  
& CMOH, Malda

**Application for the post of** \_\_\_\_\_

Memo No. DH&FWS/\_\_\_\_\_ Date \_\_\_\_\_

Draft No. \_\_\_\_\_ Date: \_\_\_\_\_ Amount \_\_\_\_\_

Name of the applicant (in BLOCK letters) : \_\_\_\_\_

Father's/ Husband's/ Guardian's Name : \_\_\_\_\_

Full Address for correspondence : \_\_\_\_\_  
\_\_\_\_\_

Dist. \_\_\_\_\_ PIN \_\_\_\_\_

Present Address : \_\_\_\_\_  
\_\_\_\_\_

Dist. \_\_\_\_\_ PIN \_\_\_\_\_

Contact Number: \_\_\_\_\_ Nationality \_\_\_\_\_

Email ID: \_\_\_\_\_

Date of Birth : \_\_\_\_\_ DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY Sex \_\_\_\_\_

Age as on 01.01.2018 \_\_\_\_\_ Days \_\_\_\_\_ Months \_\_\_\_\_ Years.

Caste Status: \_\_\_\_\_ Marital Status \_\_\_\_\_

**Educational Qualification (Attested copy must be submitted with the application) :**

Sl. No.	Exam. Passed (Strike out which is not applicable)	Year of passing	Board / Council / University	Total Marks	Marks Obtained	% Marks	Division
a.	Madhyamik						
b.	Higher Secondary						
c.	Graduation (BA / B.Com. / B.Sc./ BCA)						
d.	MBBS						
e.	Post Graduation						

**Details of Technical Qualification (Attested copy must be submitted with the application):**

Sl. No.	Exam. Passed	Year of passing	Board / Council / Institution/ University	Total Marks	Marks Obtained	% Marks	Division/ Result

**Details of Working Experience (Attested copy must be submitted with the application) :**

Sl. No.	Name of the Organization / Institution	Key task assigned	Period		Year of experience
			From	To	
<b>Total Year of Experience :</b>					

I hereby declare that all the statements made by me in the application are true and complete to the best of my knowledge and belief. I also understand that in case any of my statement is found false or incorrect during any stage of recruitment thereafter it shall disqualify me for the post applied for and/or I shall be liable for any other action that may be taken under the extant rules.

Date : \_\_\_\_\_

*Signature of the Applicant*

Place : \_\_\_\_\_

**General Information & Instructions for the applicant:-**

Following documents in original have to produce:

- (a) Mark sheet of all examination passed (b) Academic Admit Card (c) Academic Certificate (d) Technical Training / Computer Training Certificate (e) Working Experience Certificate (f) Residential Certificate (g) Voter ID Card & Ration Card (h) Cast Certificate, where applicable.



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To  
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### Application for the post of Accountant (retired Government Employee)

Draft No. \_\_\_\_\_ Date: \_\_\_\_\_

Name of the applicant (in BLOCK letters) : \_\_\_\_\_

Father's/ Husband's/ Guardian's Name : \_\_\_\_\_

Present Address : \_\_\_\_\_

Dist. \_\_\_\_\_ PIN \_\_\_\_\_

Contact Number: \_\_\_\_\_ Nationality \_\_\_\_\_

Date of Birth : \_\_\_\_\_ dd \_\_\_\_\_ mm \_\_\_\_\_ yyyy Sex \_\_\_\_\_

Age as on 01.01.2018 \_\_\_\_\_ days \_\_\_\_\_ months \_\_\_\_\_ years.

Caste Status: \_\_\_\_\_

For Accountant & Lower Division Assistant							
Sl.No.	Name & Designation at the time of Superannuation	Date of Birth	Date of Superannuation	Full Postal Address	Contact No.	Details of Pay & emoluments last drawn	Pension Drawn

I hereby declare that all the statements made by me in the application are true and complete to the best of my knowledge and belief. I also understand that in case any of my statement is found false or incorrect during any stage of recruitment thereafter it shall disqualify me for the post applied for and/or I shall be liable for any other action that may be taken under the extant rules.

Date : \_\_\_\_\_

Place : \_\_\_\_\_

*Signature of the Applicant*