

**APPLICATION FORM**

To

The Commandant  
Army Air Defence College,  
Golabandha (PO),  
Ganjam (District),  
Odisha - 761052

(Affix passport  
size attested  
photograph)

1. Post applied for :
2. Category for which applied : UR/SC/ST/OBC/EWS/ESM Caste/ Sub-Caste : \_\_\_\_\_
3. Full Name (in Block letters) :
4. Sex :
5. Father's/Husband's Name :
6. Date of Birth :
7. Age as on last date of application : \_\_\_\_ Years \_\_\_\_ Months \_\_\_\_ Days.
8. Nationality :
9. Religion :
10. Marital Status : Married/Unmarried
11. Educational Qualifications :
12. Experience in the subject field of selection :
13. Correspondence Address with Mob No :
14. Permanent Address with Mob No :
15. Whether you are ever debarred or disqualified by any Public Service Commission / Recruitment Board from any of their Examination/Selection :
16. Whether you have been ever convicted by any Court for any offence :
17. Do you have any close relative working in Army Air Defence College, if yes, give name and official address :

**DECLARATION**

I, Shri/ Sml/ Kumari \_\_\_\_\_ hereby declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false/ incorrect or being detected ineligible before or after the written test/ physical test, my candidature is liable to be rejected or any misstatement/ discrepancy detected after my appointment, my services are liable to be terminated without any notice to me. .

Place :  
Date :

Signature of Candidate  
(Name of candidate in Capital letters)

**CALL LETTER FOR WRITTEN EXAMINATION**

(To be issued to eligible candidates)

1. Post applied for :
2. Full Name (in Block letters) :
3. Father's/Husband's Name :
4. Full address for communication with Mobile No :

(Affix  
passport size  
attested  
photograph)

**FOR OFFICIAL USE**

6. Index / Roll No : \_\_\_\_\_
7. Date of Written Examination : \_\_\_\_\_
8. Time of Written Examination : \_\_\_\_\_
9. Venue of Written Examination : \_\_\_\_\_

Date :

(Signature of Exam Officer)

  
Col/Lt Col  
SO (A)  
Army AD College