U.T. ADMINISTRATION OF DADRA & NAGAR HAVELI AND DAMAN & DIU O/o the Social Welfare/Women and Child Development, Block-C, District Court Premises, Fort Area, Moti Daman-396220

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Kindl	cation for the Post of y tick 01 from below mentione NH District O Daman Distric	d District	s: -		Paste self-attested recent passport size Photograph		
1.	Applicant's Name						
2.	Father's Name						
3.	Residential Address						
4.	Mobile No.						
5.	Email Id						
6.	Date of Birth						
7.	Age as on last date of Application		Years	Months	Days		
Tick	in the below boxes as applicable	e)					
8.	Gender	○ Male ○ Female					
9.	Caste category (Whether SC/ ST/ OBC)	\bigcirc sc \bigcirc st \bigcirc obc \bigcirc General					
10	Marital Status ($$)	Married / Unmarried					
11	Domicile of DNH/Daman/Diu						
12	Educational Qualification						
Sr. No .	Qualification	Board / University	Year of Passing	Mark Obtained out of Total Marks	Percentage		
1	SSC						
2	HSC						
3	Graduation in (Prin. Sub:						
4	Post-Graduation in (Prin. Sub:)						
5	Professional Qualification						

Sr. No.	Name of the Organization/Department	Post held	Worked		Brief of service
			From	То	Brief of service
1.					
2.					
3.					
4.			9		
5.					
6.					
7.					
8.					

Note: - Candidate should attach supporting documents (Tick $\sqrt{in the below boxes as applicable}$)

- O Leaving Certificate
- **OHSC** Mark sheet
- OGraduation/Diploma Degree Certificate
- **OPost-Graduation Degree Certificate**
- OExperience Certificate
- O Caste Certificate (if applicable)

- O Domicile (if applicable)
- OSSC Mark sheet
- OGraduation Mark sheet & Degree Certificate
- OPost-Graduation Mark sheet/Degree certificate
- OProfessional qualification

DECLARATION

I,______ hereby declare that, I fulfill all the conditions for the engagement to the applied post. I am also aware that the post for which I have applied is contractual in nature and does not have any right for regularization in future in any case.

I declare that, all statements made in this application form are true, complete and correct to the best of my knowledge and belief. I understand that, in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the examination, my candidature/engagement is liable to be cancelled. **Date d: -**

Place : -

SIGNATURE OF THE CANDIDATE