APPLICATION FORM FOR COMPETITIVE EXAMINATION FROM GRAMIN DAK SEVAKS (GDSs)FOR RECRUITMENT TO THE CADRE OF POSTAL ASSISTANTS/SORTING ASSISTANTS IN POSTAL DIVISIONS/UNITS FOR UNFILLED VACANCIES OF LDCE MEANT FOR POSTMAN /MAILGUARD/DESPATCH RIDER/MTS FOR THE VACANCY YEAR 2020 (01.01.2020-31.12.2020)

**Annexure-I**

Affix recent passport sized photograph duly attested by Divisional head/Unit Head

Note: All particulars shall be filled up in BLOCK letters.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sl No. | Particulars | Details | | | | | | |
| 1 | NAME OF THE CANDIDATE |  | | | | | | |
| 2 | MALE/FEMALE |  | | | | | | |
| 3 | DESIGNATION(BPM/ABPM/DAK-SEVAK) |  | | | | | | |
| 4 | Date of Birth  (attach self- attested matriculation certificate/marks sheet) |  | | | | | | |
| 5. | COMMUNITY(UR/SC/ST/OBC/EWS) |  | | | | | | |
| 6 | EDUCATIONAL QUALIFICATION \*  (Attach self-attested copies of Marks sheet) |  | | | | | | |
| 7 | OFFICE WHERE PRESENTLY ATTACHED |  | | | | | | |
| 8 | DATE FROM WHICH CONTINUING IN GDS ENGAGEMENT |  | | | | | | |
| 9 | LENGTH OF ENGAGEMENT RENDERED AS GDS AS ON 1ST JANUARY 2020 | As on | | YY | | MM | DD | |
| 01.01.2020- / / | | | | | | |
| 10 | Age(YY/MM/DD) on 01.01.2020 for vacancy year 2020 | As on | YY | | MM | | | DD |
| 01.01.2020- / / | | | | | | |
| 11 | Whether any penalty is in currency or disciplinary proceedings pending. If yes, details therof. |  | | | | | | |

Choice of order of preference of Unit/Division other than parent Unit/Division vide Dte’s no. A-34012/05/2019-DE dated 31.07.2019.

|  |  |
| --- | --- |
| Option/Preference | Name of the Division/Unit |
|  |  |

DECLARATION

I hereby declare that the particulars furnished in the application form are true, complete and correct to the best of my knowledge and belief and will be supported by the original documents as and when required. I fully understand that in case of False/Incorrect information found at any stage, my candidature/appointment will be summarily rejected / terminated and appropriate action would be taken against me.

|  |  |
| --- | --- |
| DATE |  |
| PLACE |  |

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|  |
| Signature of Candidate |

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|  |
| Signature of Divisional /Unit Head with designation stamp |

I certify that I have verified the particulars of candidate from service record and found correct. The candidature of the applicant is RECOMMENDED/ NOT RECOMMENDED. In case NOT RECOMMENDED, reason therefor.

|  |  |
| --- | --- |
| DATE |  |
| PLACE |  |