



APPLICATION FORM

Post Applied For : Cluster Prevention Officer (CPO)

Category number : 01/2025

Name (in Block Letter) :

Date of birth (dd-mm-yyyy) :

Age (as on 31.12.2024) :

Gender : Male Female Others

Marital status :

Religion : Caste :

Address for communication:
(With Pin code)

Permanent Address :

Phone (With STD Code) :

Mobile :

Email :

Paste your recent
passport size
photograph here

Educational Qualifications*:

Qualification	Main subject	School / College / Institute/University	% of mark	Year of passing
Graduation				
Post Graduation				
Any other				

**please add extra sheets for entering more qualifications, if any.*

Work Experience*:

Period		Organisation	Designation	Job responsibilities
From	To			

**please add extra sheets for entering more experience, if any.*

Total period of Experience Claimed: (Year & Month) _____

*Attested copies of Certificates showing qualification and experience shall be attached.

DECLARATION

I hereby declare that the above mentioned details are true and correct to the best of my knowledge. I understand that my candidature will be cancelled if any information mentioned above found to be false or incorrect.

Date:

Signature:

Place:

Name:

(For Office use only)

1) Certificates Enclosed

Yes

No

2) Qualification Adequate

Yes

No

3) Experience Adequate

Yes

No

4) Whether eligible to shortlist

Yes

No

If no, reason for Rejection :

Date:

Project Director