



APPLICATION FORM

Government of Jammu & Kashmir

Leh Autonomous Hill Development - Subordinate Services Recruitment Board

- 1. Name of the Post applied for
2. Advertisement Notice No
3. Name of the candidate (in block letters)
4. Father's Name
5. Permanent address
Postal address

Affix your recent photograph duly self attested

6. Mobile No: [Grid for mobile number]

- 7. Date of birth as per Matriculation Certificate
8. Email.id
9. Category

Table with 7 columns: Name of Examination, Year of Passing, Board/University, Stream, Marks Obtd., Out of, %age. Rows include 10th, 12th, Graduation, Post Graduation, Any other Quali.

11. Attach Photocopies of relevant documents duly self attested.

12. FOR INSERVICE CANDIDATES:

Certified that Sh./Smt. S/o-D/o-W/o
Is working as from to
On basis

Seal & Signature of HOD

DECLARATION

13. I do hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief.

Place:
Date :

Signature of the candidate

Enclosures:

1:..... 2:..... 3:.....

4:..... 5:..... 6:.....

Signature of the candidate

Government of Jammu & Kashmir
Leh Autonomous Hill Development - Subordinate Services Recruitment Board
ATTENDANCE SHEET

1. Name of the post applied for : _____
2. Name of the candidate : _____
3. Father's Name : _____
4. Permanent Address : _____
5. For office use:

Affix your recent
photograph duly
self attested

Roll No: _____ Date of Test _____ Venue _____ Signature of the candidates _____

Government of Jammu & Kashmir
Leh Autonomous Hill Development - Subordinate Services Recruitment Board
ADMIT CARD

1. Name of the post applied for : _____
2. Name of the candidate : _____
3. Father's Name : _____
4. Permanent Address : _____
5. For office use:

Affix your recent
photograph duly
self attested

Roll No: _____ Date of Test _____ Venue _____ Signature of the candidates _____

ACKNOWLEDGEMENT CARD

Received an application for the post of _____
from Sh/Smt/Ms _____ S/o.W/o.D/o _____
R/o _____ Block _____ along with _____ Enclosures.

Signature of receiving clerk with

Name: _____

Designation: _____

Date: _____