SECOND SCHEDULE

Form-19

(See Rule31)

ELECTION COMMISSION OF INDIA

Claim for inclusion of name in the electoral roll for a Teachers' Constituency

To,	ONE RECENT		
The Electoral Registration Officer, (Teachers') Constituency.	UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 cm X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND		
Sir, I request that my name be registered in the electoral roll for the	(Teachers') Constituency.		
1. The particulars are :-			
Full Name	Sex		
Father's/Mother's/Husband's Name (in full)			
House Address (Place of ordinary residence)			
House/Building/Apartment No.	Street/Mohalla .		
Town/Village	Post Office		
Police Station/Tehsil/Taluqa/Mouza			
District	State		
Age Years Months Date of Birth Disability (if any):- (Tick appropriate box) (optional Field) Visual impairment Speech & hearing			
Whether registered as an elector for any assembly constituency			
Whether registered as an elector for any assembly constituency If yes, then mention the following:-			
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If yes, then mention the following:- (a) Number and Name of the Assembly constituency (b) Part/Polling Station No. (if known)	y v v		
If yes, then mention the following:- (a) Number and Name of the Assembly constituency (b) Part/Polling Station No. (if known) (c) Date of Birth	v v v		
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Name of Educational Institution	From (Date)	To (Date)	Period
1.			
2.			
3.			
4.			
In support of the above, I submit herewith			
3. *My name has not been included in the electors	OR		tive and an the address sive
*My name has been included in the electoral rebelow and I request that it be deleted from that	roll :-	teachers cons	attuency under the address give
4. I declare that I am a citizen of India and that al	I the particulars given above a	are true to the best of my kn	nowledge and belief.
Place Date			
Sate		Signatur	re of claimant
NOTE:- Any person who makes a statement or pelieve to be true is punishable under section 31 c	declaration which is false and of the Representation of the Pe	d which he either knows or	r believes to be false or does no
NOTE: - Any person who makes a statement or pelieve to be true is punishable under section 31 costrike off the paragraph not applicable.	of the Representation of the Pe	d which he either knows or cople Act, 1950.	
believe to be true is punishable under section 31 costs. *Strike off the paragraph not applicable.	of the Representation of the Pe	d which he either knows or cople Act, 1950.	
Strike off the paragraph not applicable. The application in Form 19 of Shri/Smt./Kumari	of the Representation of the Perforation of the Perforation of action ta	d which he either knows or cople Act, 1950.	
*Strike off the paragraph not applicable. The application in Form 19 of Shri/Smt./Kumari accepted and the name of Shri/Smt./Kumari Part No.	of the Representation of the Perforation)(Perforation)	d which he either knows or eople Act, 1950. ken has been- has been registe	address
*Strike off the paragraph not applicable. The application in Form 19 of Shri/Smt./Kumari (a) accepted and the name of Shri/Smt./Kumari	of the Representation of the Perforation)(Perforation)	d which he either knows or eople Act, 1950. ken has been- has been registe	address
*Strike off the paragraph not applicable. The application in Form 19 of Shri/Smt./Kumari accepted and the name of Shri/Smt./Kumari Part No.	of the Representation of the Perforation)(Perforation)	ken has been registe	address
*Strike off the paragraph not applicable. The application in Form 19 of Shri/Smt./Kumari (a) accepted and the name of Shri/Smt./Kumari Part No	Intimation of action ta	ken has been registe Electors (Address	address ered at Serial No ir al Registration Officer, ss)
Strike off the paragraph not applicable. The application in Form 19 of Shri/Smt./Kumari (a) accepted and the name of Shri/Smt./Kumari Part No. (b) rejected for the reason	(Perforation)ri(Perforation)ri(Perforation)	ken has been registe (Addressen	address ered at Serial No

^{*}To be filled in by the applicant