Composite Regional Centre for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities, Guwahati

(Under the administrative control of SVNIRTAR)

Department of Empowerment of Persons with disabilities (Divyangjan),

Ministry of Social Justice and Empowerment, Government of India.

GMCH, Campus, Hostel Road, Bhangagarh, Guwahati-781032

APPLICATION FORMAT

Advertisement No.: Adv. No. CRC/GHY/Spl.Ed/CBID/2025/206, dated: 20.05.2025

1. Name of the post applied for (in Block Letters):	:
2. Name of the Applicant (in Block Letters) :	
3. Father/Husband's name (in Block Letters) :	
4. Date of Birth:	
5. Gender (Male/Female) :	
6. Nationality:	_
7. Category (SC/ST/OBC/GEN/PWD) :	
8. Permanent Address (in Block Letters) : At :	
P.O. :	
P.S. :	
State	
PIN Code	e:
Phone No	o/Mobile No.:
E-Mail Id	l
9. Address for Correspondence (in Block Letters):	At:
F	P.O. :
F	P.S. :
	Dist. :
S	State
F	PIN Code:
F	Phone No/Mobile No.:
E	E-Mail Id

Exam. Passed	Board/Univ	Board/University		t taken	Year of passing	Division	% of marks
*If required a	dditional sheet	t as per	above r	nay be at	tached.		
	e (reverse chro			r): *			
Name & Address of	Designation	signation Areas of work		Period		Salary drawn (Pay	Reason for leaving
the organization				From	ТО	Scale, basic etc.)	
<u>Jigamzation</u>						Ctc.,	
*If required a	dditional sheet	t as per	above r	nay be at	tached.		
12. Details of	Scientific prese	entatio	n in Nati	ional/Inte	rnational Conf	ference/Publications	s in any index Jo
13. Any other	information.						
Declaration:							
hereby decla	are that all stat	ements	s made i	n the app	lication are tru	ue to the best of my	knowledge, be
based on reco	ords.						
						rll	signature of th
						ruii	signature of th
Date:							
Date: Place:							
	ıres:						

2.

3.

4.