

**Official Website  
Zilla Parishad, Dhule.**

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Date: / / 20

Department/Office Name : \_\_\_\_\_

Information Type: Notice  Tender  Other  Recruitment   
( on correct option )

If other (mention type): \_\_\_\_\_

**Specify Exact Information Link:** (Same link will be displayed on site)

( वेबसाईट वर दाखविण्यात येणाऱ्या लिंकचे थोडक्यात नाव )

English: \_\_\_\_\_

मराठी: \_\_\_\_\_

**Publication Period:**

From Date: \_\_\_\_\_

To Date : (ज्या तारखेपर्यंत वेबसाईट वर प्रसिद्धी हवी आहे ती तारीख ) \_\_\_\_\_

**Description about Information (In short):**

English : \_\_\_\_\_

मराठी : \_\_\_\_\_

**Head of Office:**

Name &amp; Designation: \_\_\_\_\_

Landline No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Email Id: \_\_\_\_\_

**Information Submitted by:**

Name & Designation: \_\_\_\_\_

Mobile No: \_\_\_\_\_

**Attachments:**

1. Authority signed letter with one information copy.
2. Soft copy of information (**Less than 8 MB in pdf format** ) in CD or Pen-drive.

**Note:** All above fields are mandatory. If any field is blank then form will not be accepted.

**CERTIFICATE FOR UPLOADING THE CONTENTS**

This is to certify that, the information submitted for uploading on the district web site has been verified by this office and *it is found correct as per IT Act 2000 and Aadhar Act 2016 (office memorandum No.10(36)/2015-EG-II (Vol-V) dated 25-3-2017 of MEIT, GOI)*. Hence, you are requested to upload attached information on the website <http://dhule.nic.in>.

*Signature*

**Head of Office**

क्र.: स्वागत/सावि/

दि. / / २०

As per the certificate of the correctness of the contents submitted by the respective office, kindly upload the attached information on district website .

**Signature,**

**Website Coordinator / DyCEO (GAD),  
Zilla Parishad, Dhule.**

*Received Date :*

*Published Date :*