APPLICATION FORMAT FOR OMBUDSMAN Applied for the District_____

<u>PERSONEL</u>	. INFORMATION	Duly attested/self attested recent photograph
1.	Name:	
2.	Father/Husband Name	
3.	Age (as on) (attach date of birth certificate	e):
4.	Address for correspondence:	
	With Tel.No.	
5.	Permanent address (attach proof of residence):	
6.	Are you medically (physically & mentally) fit to conduct field visits? (Attach a medical fitness certificate)	
7.	Whether a member of a political party?	
	(Attach a personal affidavit certified by a notary public)	
8.	Whether convicted/charge sheeted in a criminal case?	
(Attach a personal declaration certified by a notary public).		oublic).
9.	Do you have responsibility of Implementing MGNREGA in any capacity?	
PROFESSI 10.	Highest educational qualification (Attached copy of certificates	
11.		
	(Attached copy of certificates attested by a gazetted officer)	
12.	Field of experience	,
13.	Last post/position held, if any	
14.	Member of any society/professional body, if any (give details):	
It is advertisementhis is a par MGNREG	laration: certified that above information furnished by me are ent and the "Instructions on Ombudsman" issued by the et time work and all functions are to be carried out with Act, Rules and Schemes framed there under and operatime to time.	e Govt. of India and understand that hin the purview and confines of the
Place:		Signature of applicant
Date:		Name of the applicant