

APPLICATION FORM FOR THE POST OF LIFT OPERATOR IN SESSIONS DIVISION BHIWANI.

Affix Latest passport size colored photograph of the candidate attested by a Gazetted Officer

To
The District & Sessions Judge
Bhiwani.

Subject:- Application for the post of Lift Operator.

Name of Candidate	:				
Father's / Husband's Name	:				
Date of Birth	:				
Age as on 01.01.2024	:				
Sex(Male/Female)	:				
Nationality	:				
Complete Permanent Address with Pin code and State	:				
Complete Correspondence Address with Pin code and State	:				
Category (Caste)	:				
Academic Qualification					
Examination/Degree	Board/ University	Year of passing	Divn/Class	%age of Marks	Grade Point
10 th /Matric					
I.T.I.					
Graduation					
Other qualifications, if any)					
Contact/Mobile Number	:				
Email I.D.	:				

Note:-Attach self-attested photocopy of all relevant documents.

I, _____ son/daughter/wife of Shri. _____, hereby declare that the information given above and in the attached documents are true and correct to the best of my knowledge and belief and nothing has been concealed therein. I understand that if the information given by me is found false/not true, I may be prosecuted under the relevant provisions of law.

Date:.....

Place:.....

(Signature of Candidate)