# SELECTION TEST FOR SCHLORSHIP- 2017

**APPLICATION FORM**
( Last date for submission of filled application before January 2017 )

<table>
<thead>
<tr>
<th>Roll No.</th>
<th>( to be filled by office )</th>
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</table>

**Note:** Before filling read carefully the instructions for each column provided along with this application form. The form is to be filled in neatly and legibly. Application incomplete or vague in any respect will be summarily rejected.

1. **Name of the Candidate (IN BLOCK LETTERS)**
   - First Name
   - Middle Name
   - Surname
   - Master/Km.

2. **Date of Birth/Age**:
   - In figure
   - D D M M Y Y Y
   - In words

3. **Gender**
   - Boy
   - Girls
   - TG
   - b) Category
   - Gen
   - SC
   - ST
   - OBC
   - c) Area
   - Rural
   - Urban

4. a. **Mother’s Name (BLOCK LETTERS)**:
   
   b. **Father’s Name (BLOCK LETTERS)**:
   
   c. **Name of the Guardian**:
   
   d. **Relationship with Candidate**:

5. **Annual Income of Parents**
   - Rs ____________ (in words) Rupees

6. a. **Present Postal Address**
   - 
   - PIN Code
   
   b. **Permanent Address**
   - 
   - PIN Code
   
   c. **Telephone No. with STD code/Mobile**
   - 
   - E-Mail ID

7. **Nationality**:
8. **Religion**

8. **School(s) from where the candidate passed Classes-II, III and is studying in Class-IV**
   - a) (I) Name of the School
   - (II) Medium of school
   
   b) **Name of the Village or Town**
   - (in which the School is located)
   
   c) **Name of the District**

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For more information contact : 8904787769