

Application Form for Engagement as Contractual Staff for the Session

Post Applied for: _____

1.	NAME	(in b	lock l	etter	s):	1	1					1									
																			Past	e	
2.	Parentage:													Passport Size			e				
		-																Ph	otog	raph	
3.	Date of	Birtl	n:		_												_				
1.	Residen	ce:																			
	Distt	:													Pin:						
5.	Contact	No.			_						Er	nail Id	:					_			
5.	Details of	of Q	ualific	cation	ı:										 			r			
D	Degree/Diploma		Marks obtained/ Grade			Max Marks			Percentage				Institution/ College/ University		Mode of acquiring the Degree		Year of Passing				
7.	Highest	Qua	lificat	ion:																	
7.	Highest Whether				Г qua																

Year	Name of the Institution where worked	No. of Years/ Months	Period			
1 Cai		No. of Tears/ Wioliths	From	То		

I______do hereby solemnly declare that the particulars given herein above are correct to the best of my knowledge and belief and in case of any discrepancy, I shall be responsible for any consequences/criminal prosecution, that may arise out of it.

Signature of Applicant

Date:_____

Bank Copy



Principal Government College of Physical Education Gadoora Ganderbal

Business Unit: Duderhama Ganderbal

A/C No.: 056004050000067

Pay-in-Slip

Date:

Name:

Parentage:

Address:_____

Amount (in Figures): Rs. 100/-

Amount (in words):

One Hundred Only

Signature of Depositor:

Contact No.: _____

Date:

DC No.:

Bank Seal & Cashier Signature

College Copy



Principal Government College of Physical Education Gadoora Ganderbal

Business Unit: Duderhama Ganderbal

A/C No.: 056004050000067

Pay-in-Slip

Date:

Name:_____

Parentage:____

Address:

Amount (in Figures): Rs. 100/-

Amount (in words):

One Hundred Only

Signature of Depositor:

Contact No.:

Date:

Bank Seal & Cashier Signature

Candidate Cop



Principal Government College of Physical Education Gadoora Ganderbal

Business Unit: Duderhama Ganderbal

A/C No.: 056004050000067

Pay-in-Slip

Date:	

Name:_____

Parentage:

Address:

Amount (in Figures): Rs. 100/-

Amount (in words):

One Hundred Only

Signature of Depositor:

Contact No.:

Date:

DC No.:

Bank Seal & Cashier Signature

DC No.: