Application Form

"Potential usage of LQAS based intervention package as monitoring and evaluation strategy at the unit of implementation in Anemia Mukt Bharat Program"

Post applied:

1.	Full Name (in capita		Paste Your Photo				
2.	Father's name:						
3.	Date of birth:						
4.	Gender:						
5.	Nationality:	•••					
	Do you claim any age relaxation? (If yes, bring the proof for the same at the time of examination/interview)						
7.	Address for correspo	ondence with PIN	code:				
10 digit Mobile No.: E-mail:							
8.	Permanent address					··	
9. E S.	Educational/Professio Examinations	University	Subjects	Year of	Percentage	Class/ Division/	
S. No	Passed	or Board	taken	passing	of marks	Grade	

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10.	Details.	ot:	previous	experience:	Current	occupation	first)

S. No.	Name of the post held	Employer/Organization and nature of employment	Pay scale/salary drawn	Period		Nature of duties
				From	То	

11. Any other relevant information you wish to add related to fieldwork experience, etc. (Use separate sheets if necessary)

DECLARATION

I declare that the information furnished above is true, complete, and correct to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage or any attempt has been made by me to conceal or misrepresent the facts willfully, my candidature/appointment shall be liable to be canceled/terminated without any notice or compensation in lieu thereof.

Place:	Signature of the candidate
Date:	