EAST COAST RAILWAY

APPLICATION FORM (in A4 size paper) E.N.No. ECoR /Pers/S&G/2016-17 dated 24.01.2017

Application for Recruitment against Scouts & Guides Quota 2016-17

After reading the Employment Notice and agreeing to all the terms and conditions notified therein, I do hereby apply for recruitment against Scouts & Guides quota under Employment Notice No.ECoR/ Pers/ S&G/2016-17 dated 24.01.2017 and furnish the following particulars:

. Cand	lidate	's full	name	(in cap	ital let	ters):	1						1				_	older than three
																		months) passport size
																		colour photograph.
2. Fath	er's/	<u> </u>	nd's n	ame (ir	n capita	al lette	ers):											(Not to be attested)
																	_	
		y Band apply	d & ing for				GP Rs. GP Rs.				Pay 1	Band	-1 GP	Rs				
4. Date of Birth:		D	D	M	M	Y	Y	1	Y	Y	Т	5 C						6. Sex :
											5. Community (SC/ST/OBC/UR)							(Male /Female)
7. Educational qualification:						8. Religion								9. Nationality				
10 T	ick (1	√) the		Serving Railway Employee				Divorcee/ Widow			N	linor	ity	Eco	nomic	nically Weaker		Residents of Jammu &
		box, i	f								Co	mmu	nmunity		Se	Section		Kashmir
you a	ire:																	
11. Full address for correspondence											12. M	obile r	umbe	er.				
											-							
													13. E-N	Vlail II):			
												14. Nearest Railway Station						
											15. Scout/Guide District							
State	:				PI	N										1		
16. Ex	am F	ee Det	ails:		l	<u> </u>						17. I	Left Ha	nd Th	umb I	mpression		
IPO No./Date						Am	Amount (Rs.)											
18. Write 2 (two) clear visible marks of						1)	1)											
identification on your body. (Moles, Cut- marks or scar marks etc.)					2)	2)												
App	lican	t's DF	CLA	RATIC	ON Co	opv th		wine	g par	agrai	ph in	Eno	lish/H	indi ir	the s	space below	jn v	your own handwriting
in ru	nnin	g scrij	ot (not	in cap	oital/sp	paced	out let	tters). A pj	plica	tions	with	out th	is wri	tten d	leclaration v	vill	be rejected: of my knowledge and
	-								• •									eligibility criteria, my
							_							-	_			
canc	naatu	ire/ ap	pointm	ient is i	nable t	o be c	ancen	ea/te	rmına	itea v	vitno	ut an	y notic	e at an	y stag	ge even after	emp	paneiment.
_																		
_													-					
_																		

20. Place: 21. Date:

1

For office use only

Paste (do not pin or

staple) your recent (not

		ANNEXURE-I
Certificate No		
	CERTIFICATE OF ACTIVENESS	
This is to certify that Shr	i/Ms	of
	. State/District/Division is an active member of	Group since
year	s duly registered with the State/District Association.	
Date:		
Seal and Office Stamp		
(Name & Sign) Group Leader(S/G)	(Name & Sign) DOC(S/G)	(Name & Sign) DC(S/G)

Page2 of 2