

**APPLICATION FORM FOR THE ACCEPTANCE OF PATWARI CANDIDATES FOR
COMBINED SCREENING TEST IN MOHAL AND SETTLEMENT DEPARTMENT**

1. Name of the Distt. to which applied _____
2. Preference of the candidate whether Mohal or Settlement
(i) First Preference _____
(ii) Second Preference _____
3. Name of the Candidate _____
(In Block letters)
4. Father's Name /Husband Name _____
5. Date of Birth _____ Age (as on 1.1.2019) _____

Affix recent
passport size
photograph duly
attested by a
Gazetted officer

6. Correspondence Address

House No/Village _____

Post Office/Tehsil/Sub-Tehsil/ _____

District _____

State _____

Pin Code _____

Contact Number _____

7. Permanent Address

House No/Village _____

Post Office/Tehsil/Sub-Tehsil _____

District _____

State _____

Pin Code _____

8. Category to which belong _____ (Attach attested copy of certificates)
- Educational Qualification _____ (Attach attested copy of certificates)
9. Any other qualification /experience _____ (Attach attested copy of certificates)
10. Fee Rs. _____ Demand Draft No. _____ Date _____
11. Whether registered in any employment exchange Yes/ No _____
12. If Yes, Registration No. and name of the employment exchange _____
13. I hereby declare:-

(a) That I am not involved in any criminal case and no criminal proceedings are contemplated against me in any court of law.

(b) That the above particulars mentioned in the application are correct and true to the best of my knowledge and belief. If particulars mentioned by me are found false at any stage then I shall be liable to be disqualified/ terminated without any notice.

Note:- (a) Candidates should apply to concerned Deputy Commissioners in both cases i.e Mohal (Revenue) & Settlement Department.

(b) The candidates who will be selected for Settlement will be allocated to Kangra Settlement Division & Shimla Settlement Division based on their merit in the selection list.

Dated :- September, 2019.

(Signature of the applicant)