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APPLICATION FORM FOR THE POST OF COMPUTER OPEARTOR

Full Nam	coloured				
Father's Name :					passport size
Mother's Name :					photograph
Date of E	Birth (DD-MM-Y)	YYY) :			
Gender		:			
Category	(Gen/SC/ST/OE	BC) :			
Phone wi	ith std code/Mol	b. No. :			
Email ID		:			
Mailing A	ddress	:			
Language	e Known	:			
Educatior	nal Qualification	:			
SI.No.	Examinations	Name of the	Percentage	Subjects	Year of
		Board/University	of marks		passing

Affix a recent

Details of Experience:	
hereby verify that all the details given by me in the application form are true accorrect to the best of my knowledge.	and
(Full Signature)	
Place:	
Date:	