Declaration

Form "A"

[See rule 5(1)]

L, Shri/ Smti	**********************	
Son/ daughter/ husband/ wif	e of Shri/ Smti	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Agedyears, resident	t of	
**************************************	*************	***************************************
do hereby declare as follows		
1) That I have filled my app	lication for the post o	of
advertised vide		
2) I have (number) li	ving children as on to	oday. Their names, sex and date of birth
are;		
Name	Sex	Date of birth
A) T		
		children, I am liable to be disqualified
for the appointment to th	e post.	
4) I also declare that:		
	iarried and my spouse	e and I have not violated the provision of
legal age of marriage.		anislan af The Benkildian of Child
		ovision of The Prohibition of Child
	No. 6 of 2007) shall b	be a disqualification for appointment to
the post applied for.		
Dlases	Tratilitation Tratilitation Augusta Martinia	,
Place:		Other Call Control
Date:		Signature of the applicant