Application Form for Workshop Mechanic							Affix self signed		
1.	Full Name	:				- '	atest passpor		
2.	Father's name	:				_	P0 1		
3.	Date of Birth	:							
4.	Male/Female	:							
5.	Permanent Address	:	•						
6.	Contact No.								
7.	E.mail ID	:							
8.	Marital Status								
	Language Known								
10	. Whether belong to G	en/BC/SC/S	ST :						
11	. Academic Qualificat	ion:				136	Marks	%age	
Sr. No.	Educational /other qualification	Year of passing	Name of school/ Institute	University/ board	Subjects taken	Maximum marks	obtained	70agi	
1.	10 th								
2.	10+2		0.7						
3.	Diploma								
4.	Higher Education								
	2. Whether passed Pu 3. Experience if any:	njabi upto	matric leve	el: YES/NO					
I here	e by declare that the panothing has been conce	articulars m aled there f	entioned aborrom.	ove are true an	d correct to	the best of m	y knowledg	e	
Place: Date: Signature						ignature of ca	of candidate		