

ATTESTATION FORM (Advt. No.01/2023)

1	Name of the candidate in full (in Block Capital Letters)				
2	Post applied for	Post Graduate Teacher in _____			
3	Roll No.				
4	Name of Father / Mother / Husband (Put a tick mark)				
5	Gender (Put a tick mark)	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
6	Date of Birth				
7	Present Address /Address for correspondence in full				
8	Email Id -				
9	Mobile No.				
10	Permanent Address in full				
11	Nationality	Indian			
12	Religion				
13	Category (UR/SEBC/ SC / ST)				
14	Whether PwD / Ex-Serviceman / Sportsperson				

15.

Details of Educational Qualification

Qualification	Name of the Board / University	Year of Passing	Division	% of marks secured
HSC / 10 th				
Higher Secondary (+2) / 12 th				
Graduation				
Whether you have passed with Distinction				
Post Graduation				
B. Ed.				

16.

Details of Employment (for in-service candidates only)

Designation	Period		Full address of the Office / Firm / Institution
	From	To	

Declaration

I hereby certify that the information furnished above is correct and complete to the best of my knowledge and belief. I further certify that I have not suppressed any information which might impair my candidature for employment.

Place:

Date:

Full signature of the Candidate