

APPLICATION PROFORMA FOR THE POSTS OF CLERK
DISABLED PERSONS ONLY- 2019

Department of Local Government Punjab
(Punjab Municipal Bhawan, Plot No.-3, Sector-35 A, Chandigarh)
(Recruitment Cell)

MUNICIPAL CORPORATIONS AND
MUNICIPAL COUNCILS-NAGAR PANCHAYATS

Affix latest
Self Attested
Passport Size
photo

Name of Post : Clerk

Category of reservation in which applied:.....% age of disability.....

1.	Name of Candidate (In Block Letters)					
2.	Father/Husband Name (In Block Letters)					
3.	Date of Birth (DD/MM/YY) (Proof attached)					
4.	Age as on 1 st January, 2019					
5.	Place of Birth (District & State)					
6.	Permanent Home Address					
7.	Correspondence Address					
8.	Phone/Mobile No.					
9.	Email ID					
10.	Nationality					
11.	Punjab State Domicile Certificate which was issued by the competent authority (copy enclosed).					
12.	Qualifications					
	Name of exam passed	Board/ University	Year of passed	Marks obtained	Total marks	%age of marks obtained

13. Whether passed Punjabi at the matric level Yes/No () attach proof.

Self Declaration

I.....son/daughter of Sh.....
aged.....(years) do hereby declare that the above information and documents attached are correct and true to the best of my knowledge and nothing has been concealed therein. In case the information submitted by me is found incorrect or wrong, competent authority shall be at liberty to take action against me in accordance with law.

Date:-

Place:-

Signature of Candidate

Detail of documents attached

**APPLICATION PROFORMA FOR THE POST OF SERVICE GROUP-C
DISABLED PERSONS ONLY-2019**

Department of Local Government Punjab
(Punjab Municipal Bhawan, Plot No.-3, Sector-35 A, Chandigarh)
(Recruitment Cell)

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**MUNICIPAL CORPORATIONS AND
MUNICIPAL COUNCILS-NAGAR PANCHAYATS**

Name of Post:-

- (1) **Lineman** : Category of reservation in which applied:-.....%age of disability.....
- (2) **Assistant Lineman** : Category of reservation in which applied:-.....%age of disability.....
- (3) **Pump Operator, Assistant Pump Operator, Pump Driver and Tubewell Driver**
: Category of reservation in which applied:-.....%age of disability.....

1.	Name of Candidate (In Block Letters)					
2.	Father/Husband Name (In Block Letters)					
3.	Date of Birth (DD/MM/YY) (Proof attached)					
4.	Age as on 1 st January, 2019					
5.	Place of Birth (District & State)					
6.	Permanent Home Address					
7.	Correspondence Address					
8.	Phone/Mobile No.					
9.	Email ID					
10.	Nationality					
11.	Punjab State Domicile Certificate which was issued by the competent authority (copy enclosed).					
12.	Qualifications					
	Name of exam passed	Board/ University	Year of passed	Marks obtained	Total marks	%age of marks obtained

13. Whether passed Punjabi at the matric level Yes/No () attach proof.

Self Declaration

I.....son/daughter of Sh.....
aged.....(years) do hereby declare that the above information and documents attached are correct and true to the best of my knowledge and nothing has been concealed therein. In case the information submitted by me is found incorrect or wrong, competent authority shall be at liberty to take action against me in accordance with law.

Date:-

Place:-

Signature of candidate

Documents attached

**APPLICATION PROFORMA FOR THE POST OF SERVICE GROUP-D
DISABLED PERSONS ONLY-2019**

Department of Local Government Punjab
(Punjab Municipal Bhawan, Plot No.-3, Sector-35 A, Chandigarh)
(Recruitment Cell)

**MUNICIPAL CORPORATIONS AND
MUNICIPAL COUNCILS-NAGAR PANCHAYATS**

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Name of Post: Beldar, Mali, Mali-cum-Beldar, Mali-cum-Chowkidar, Mali-cum-Beldar-cum-Chowkidar & Road Gang Beldar

Category of reservation in which applied:.....%age of disability.....

1.	Name of Candidate (In Block Letters)					
2.	Father/Husband Name (In Block Letters)					
3.	Date of Birth (DD/MM/YY) (Proof attached)					
4.	Age as on 1 st January, 2019					
5.	Place of Birth (District & State)					
6.	Permanent Home Address					
7.	Correspondence Address					
8.	Phone/Mobile No.					
9.	Email ID					
10.	Nationality					
11.	Punjab State Domicile Certificate which was issued by the competent authority (copy enclosed).					
12.	Qualifications					
	Name of exam passed	Board/ University	Year of passed	Marks obtained	Total marks	%age of marks obtained

13. Whether passed Punjabi at the middle level Yes/No () attach proof.

Self Declaration

I.....son/daughter of Sh.....
aged.....(years) do hereby declare that the above information and documents attached are correct and true to the best of my knowledge and nothing has been concealed therein. In case the information submitted by me is found incorrect or wrong, competent authority shall be at liberty to take action against me in accordance with law.

Date:-
Place:-

Signature of candidate

Documents attached

**APPLICATION PROFORMA FOR THE POST OF SERVICE GROUP-D
DISABLED PERSONS ONLY-2019**

Department of Local Government Punjab
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**MUNICIPAL CORPORATIONS AND
MUNICIPAL COUNCILS-NAGAR PANCHAYATS**

Name of Post:-

- (1) **Mate Civil** : Category of reservation in which applied:-.....%age of disability.....
- (2) **Skilled Helper** : Category of reservation in which applied:-.....%age of disability.....

1.	Name of Candidate (In Block Letters)					
2.	Father/Husband Name (In Block Letters)					
3.	Date of Birth (DD/MM/YY) (Proof attached)					
4.	Age as on 1 st January, 2019					
5.	Place of Birth (District & State)					
6.	Permanent Home Address					
7.	Correspondence Address					
8.	Phone/Mobile No.					
9.	Email ID					
10.	Nationality					
11.	Punjab State Domicile Certificate which was issued by the competent authority (copy enclosed).					
12.	Qualifications					
	Name of exam passed	Board/ University	Year of passed	Marks obtained	Total marks	%age of marks obtained

13. Whether passed Punjabi at the middle or matric level Yes/No () attach proof.

Self Declaration

I.....son/daughter of Sh.....
aged.....(years) do hereby declare that the above information and documents attached are correct and true to the best of my knowledge and nothing has been concealed therein. In case the information submitted by me is found incorrect or wrong, competent authority shall be at liberty to take action against me in accordance with law.

Date:-

Place:-

Signature of candidate

Documents attached

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**MUNICIPAL CORPORATIONS AND
MUNICIPAL COUNCILS-NAGAR PANCHAYATS**

Name of Post: Swasthak Sahayak

Category of reservation in which applied:.....%age of disability.....

1.	Name of Candidate (In Block Letters)					
2.	Father/Husband Name (In Block Letters)					
3.	Date of Birth (DD/MM/YY) (Proof attached)					
4.	Age as on 1 st January, 2019					
5.	Place of Birth (District & State)					
6.	Permanent Home Address					
7.	Correspondence Address					
8.	Phone/Mobile No.					
9.	Email ID					
10.	Nationality					
11.	Punjab State Domicile Certificate which was issued by the competent authority (copy enclosed).					
12.	Qualifications					
	Name of exam passed	Board/ University	Year of passed	Marks obtained	Total marks	%age of marks obtained

13. Whether passed Punjabi at the middle level Yes/No () attach proof.

Self Declaration

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aged.....(years) do hereby declare that the above information and documents attached are correct and true to the best of my knowledge and nothing has been concealed therein. In case the information submitted by me is found incorrect or wrong, competent authority shall be at liberty to take action against me in accordance with law.

Date:-

Place:-

Signature of candidate

Documents attached

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Name of Post:-

(1) Peon : Category of reservation in which applied:-.....%age of disability.....

(2) Safai Karamchhari : Category of reservation in which applied:-.....%age of disability.....

1.	Name of Candidate (In Block Letters)					
2.	Father/Husband Name (In Block Letters)					
3.	Date of Birth (DD/MM/YY) (Proof attached)					
4.	Age as on 1 st January, 2019					
5.	Place of Birth (District & State)					
6.	Permanent Home Address					
7.	Correspondence Address					
8.	Phone/Mobile No.					
9.	Email ID					
10.	Nationality					
11.	Punjab State Domicile Certificate which was issued by the competent authority (copy enclosed).					
12.	Qualifications					
	Name of exam passed	Board/ University	Year of passed	Marks obtained	Total marks	%age of marks obtained

13. Whether passed Punjabi at level..... Yes/No () attach proof.

Self Declaration

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aged.....(years) do hereby declare that the above information and documents attached are correct and true to the best of my knowledge and nothing has been concealed therein. In case the information submitted by me is found incorrect or wrong, competent authority shall be at liberty to take action against me in accordance with law.

Date:-

Place:-

Signature of candidate

Documents attached