# GOVERNMENT OF PUDUCHERRY CO-OPERATIVE DEPARTMENT

Application for Direct Recruitment to the post of JUNIOR INSPECTOR OF CO-OPERATIVE SOCIETIES (Pay Band -1: ₹5200-20200 with Grade Pay: ₹2800)

	Name of the l								
JUNIOR INSPECTOR OF CO-OPERATIVE SOCIETIES					Paste a recent passport size colour photograph				
Applicant's Signature:									
1	Application Number (For office use on	ly)	:						
2	Name of the Applicant (with Initial)		:						
3	Father's Name (with Initial)		:						
4	Mother's Name		:						
5	Date of Birth (dd/mm/yyyy)		:						
6	Age as on 16/03/2016		:Years	Months					
7	Gender (Tick relevant)	: Male / Female / Transgender							
8	Address								
	Address for communication		Permanent Address						
	Pin Code:		Pin Code:						
9	Mobile Number (compulsory)		:						
10	E-Mail Id		:						
11	Educational Qualifications as on 16/0	3/2016	: Give details below						
Sl. No	Qualification	Name	of the University / Ins	titution	Month & Year of Passing				
1	SS.L.C.				-				
2	Higher Secondary or equivalent								
3	U.G. Degree								
12	`Indian Nationality ?	: YES / NO							
13	Whether Native / Resident of Puduche	: YES / NO							

Religion

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15	Have Regd. in Employment Exchange?		: Yes / No				
	a. Region (Tick relevant)		: Puducherry / Karaikal / Mahe / Yanam				
	b. Registration No.	:					
	c. Next Renewal Date	: Month/Year					
16	Community (Tick relevant)		ORIGIN/BT- MBC-ORIGI MIGRANT/	R/ BCM-ORIGIN/BCM-M -MIGRANT/ EBC-ORIGI -N/MBC-MIGRANT/ OBC SC-as per Presidential Ord nan / SC-Others	N/EBC-MIGRANT/ C-ORIGIN/OBC-		
17	Category (Tick relevant)		: PH / XSM / MSP / Inservice / Widow / Divorced Woman / Woman Judicially Separated				
	(i) If <b>Differently Abled Person (PwD</b> (Attach copy of certificate)	))	Percentage of Disability%				
	(iii) If Ex-Serviceman(XSM), Specify (Attach copy of certificate)  (iii) If Meritorious Sports Person(MSP), Specify (Attach copy of certificate)		(i)Date of enrolment in Armed Forces:				
			(i). Event(International / Inter-University / National-Junior/ National-Senior / National Sports / Games for Schools				
			(ii). Sports	(Spe	ecify game)		
			(iii). Medal (Gold / Silver / Bronze / Participation)				
		(iv). No. of Medals / Participation					
	(iv) If Inservice						
	<ul><li>a. Designation of the Applicant</li><li>b. Dept./Office in which working</li><li>c. Date of Joining Present Post</li></ul>		:				
			:				
			:				
	(v) Whether Widow / Divorced Woman / : Yes / No Woman Judicially Separated (if Yes, attach necessary supporting documents)						
18	Examination Centre (Tick relevant)		: (PUDUCHERRY / KARAIKAL / MAHE / YANAM)				
19	Medium of Examination opted i.e. in addition to English (Tick relevant)		: (TAMIL / MALAYALAM / TELUGU)				
20	Aadhaar Number		:				
21	Certificates		: Give details below				
Certificate Name			rtificate umber	Date Issued (dd/mm/yyyy)	Taluk Office		
	PIC						
Community Certificate							
Nativity / Residence							
					3/-		

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### **DECLARATION**

- 1 I have read the provisions in the Notification of the examination carefully and hereby undertake to abide by them.
- I declare that I am a Native/Resident of Union Territory of Puducherry by virtue of continuous residence for the last five years and I understand that any deviation in this regard will render my selection invalid
- I have not submitted any other application for this examination. I am aware that if I contravene this, my application will be summarily rejected.
- 4 I further declare that I fulfill all the conditions of eligibility regarding age limits, educational qualification, technical qualification etc., prescribed for admission to the examination.
- I also declare that I have never been convicted by any court of law. I also declare that no charge sheet is pending against me in any court of law.
- I understand that success in examination confers no right to appointment. I further understand that appointment is subject to fulfillment of all conditions stipulated in the Notification.

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found suppressed / false or incorrect or ineligibility being detected before or after the examination, my candidature / appointment is liable to be cancelled

DATE:

PLACE:

SIGNATURE OF THE APPLICANT

..4/-

## (FOR IN-SERVICE CANDIDATES ONLY)

## CERTIFICATE BY HEAD OF DEPARTMENT / HEAD OF OFFICE

Certified	that	Thiru/Tmt/Ms		working as
		in		has completed more than
three years of	service in	the above said post.	His/Her date of appointment	in the above said post is
		and no criminal case	/ disciplinary proceedings are p	ending against him/her.
DATE:				
PLACE:				

SIGNATURE OF THE HEAD OF DEPARTMENT / OFFICE (Office Seal)