<u>Prescribed Application Form</u> (To be downloaded)

ASSAM STATE DISASTER MANAGEMENT AUTHORITY

ASSAM SECRETARIAT COMPLEX :: OPP. SECTT. BR. OF SBI :: DISPUR :: GUWAHATI :: 781 006.

Post applied for [please put (\checkmark) mark against the post. Separate application forms to be used for applying for multiple posts]:

Human Resource Specialist (HRS)	
Office Management Executive (OME)	

Please read the instructions given below carefully:

While filling up the Application Form, an applicant is requested to note the following:-

- This application is a key part of the selection process. Fill each and every part of the Form carefully and completely. In case, any clause in the form is not applicable in your case, please write "Not Applicable" (NA) in the space provided.
- Incomplete applications will be rejected.
- Please enclose copies of mark-sheets of all Board/ University Examinations.
- Please enclose copies of work experience certificates, if any.
- Please enclose copies of relevant certificate relating to proficiency in Computer Application.
- Employment Exchange Registration Card, if available.
- The LAST DATE of submission should be strictly adhered to.
- Candidates are liable to be disqualified for furnishing false or wrong information.

FILL IN THE FOLLOWING IN CAPITAL LETTERS ONLY:-

1.	Name of the applicant as recorded in HSLC or Equivalent Certificate:	
2.	Sex : Male Female	
3.	Date of Birth (as recorded in HSLC or equivalent certificate):	
	Date Month Year	
4.	Complete Age as on (01-01-2024) Years.	
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5.	Caste: SC ST OBC Gen Please specify (In case of SC/ST candidates pro	oer
	caste certificate from the Competent Authority must be furnished.)	
6.	Name of Father:	
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7.	Name of Mother:	
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8.	Name of Spouse (if applicable):	
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9.	Procent Occupation if any	
Э.	Present Occupation, if any:	

10.	Educational	Qualifications	(HSLC	/ HS onwards	١:

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DECLARATION

- 1. I hereby declare that I fulfil all the conditions of eligibility regarding age limits, educational qualifications, computer proficiency etc. prescribed for admission to the recruitment.
- 2. I have enclosed photocopies of certificates in support of my claim for Educational Qualification / Computer Proficiency and Age.]
- 3. I hereby further declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief.
- 4. I understand that in the event of any information being found suppressed / false or incorrect or ineligibility being detected before or after the recruitment, my candidature / appointment is liable to be cancelled forthwith.

Place:

10 Email ID if any

Date:

Signature of the Applicant

- APPLICATION NOT SIGNED BY THE CANDIDATE WILL BE REJECTED.
- PHOTOCOPY AND SCANNED SIGNATURE WILL NOT BE ACCEPTED.

NOTE:

APPLICANTS ARE ADVISED TO SUBMIT THE APPLICATION WELL BEFORE THE CLOSING DATE SO THAT IT REACHES **THE CHIEF EXECUTIVE OFFICER, ASSAM STATE DISASTER MANAGEMENT AUTHORITY, ASDMA BUILDING, ASSAM SECRETARIAT, OPP. SECTT. BR. OF SBI, DISPUR, GUWAHATI-06,** ON OR BEFORE THE CLOSING DATE. APPLICATIONS NOT RECEIVED OR DELIVERED AT ASDMA OFFICE WITHIN THE FIXED DATE AND TIME FOR THE PURPOSE OR NOT SUBMITTED IN THE MANNER PRESCRIBED WILL NOT BE CONSIDERED. NO APPLICATION RECEIVED AFTER THE CLOSING DATE WILL BE ACCEPTED UNDER ANY CIRCUMSTANCE.