



GOVERNMENT OF SIKKIM,
ROADS & BRIDGES DEPARTMENT
GANGTOK – 737101, SIKKIM

Photo

APPLICATION FORM

{Write in CAPITAL letters only}

Roll No.

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{for official use only}

Recruitment year

2	0	1	7
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1. Name of the applicant as in the Certificate of Class - X Board Examination

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2. Father's Name

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3. If Married: Husband's Name

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4. Gender

Male

Female

5. Date of Birth & Age

		Date		Month		Year		Age	

6. Address for Communication {do not repeat name}

City

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District

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Pin
Code

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Contact No.
Phone

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Mobile No.

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7. {a} Community: {Tick}

COI

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{b} Whether person with disability: Blindness & Low vision

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Hearing impaired

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Locomotor disability & Cerebral Palsy

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8. Sikkim Subject/Certificate of Identification No:

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9. Educational Qualification

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Details of Educational Qualification {from X Standard onwards}

Sl.No.	Name of the Qualifying Exam	Month & Year of Passing	Name of the School/Collage Stuided	Name of the Board/University	% Obtained

10. Permanent place of residence:

Town

District

11. Details of documents to be submitted

Sl.No.	Particulars of certificates Submitted	Certificate Sl.No.	{Tick} mark for office use only
1	Class X Mark sheet		
2	Class X Pass Certificate		
3	Certificate of Diploma		
4	Certificate of B.Tech.		
5	Marksheet of Graduation		
6	ST/SC Certificate		
7	Sikkim Subject/Certificate of Identification		
8	Employment Card No.		
9	Incase persons with disability, please submit certificate of (a) Blindness & Low Vision: (b) Locomotor disability & Cerebral Palsy		

DECLARATION

I hereby declare that the information furnished above are true and correct to the best of my knowledge and belief. In case any information furnished is found incorrect at any stage my candidature may be rejected

Signature of the Applicant