

APPLICATION FORM



AGRICULTURAL SCIENCE FOUNDATION HULKOTI – 582205, GADAG DISTRICT KARNATAKA STATE

*Affix your
recent self
attested
passport size
photograph*

APPLICATION FOR THE POST OF DRIVER (T1) (TRACTOR)

Name _____

Advertisement No. & date: _____

Demand Draft No. & Date _____

Instructions to the candidates

- 1) The application should be filled in clearly and legibly or typed.
- 2) Please fill up each item clearly and completely.
- 3) Application should be filled in all respects with relevant information sought only. Avoid extraneous information.
- 4) All supporting documents enclosed along with the application should be page numbered and arranged in chronological order as per the application format.
- 5) Application is liable to be rejected for non-compliance of the above instructions.

| | |
|--|---|
| 1. Name of the post applied for | |
| 2. Full Name (as entered in SSLC or equivalent marks card) | |
| 3. Father's/Husband's Name | |
| 4. Date of Birth (Self attested copy of Bonafide certificate to be enclosed) | |
| 5. Gender (Male / Female) | |
| 6. Aadhar Number | |
| 7. Marital Status | Married / Unmarried |
| 8. Permanent Address | |
| 9. Address for communications /Correspondence with pin code | |
| 10. E-mail Id | |
| 11. Contact numbers (Mobile / Landline with STD code) | |
| 12. (a) Native place | |
| (b) Taluk | |
| (c) District | |
| (d) State | |
| 13. Nationality | |
| 14. Religion & Caste | |
| 15. If Physically challenged candidate, please give details | OH/VH/HH Percentage of disability: _____ (Enclose self attested copy of prescribed certificate) |
| 16. Languages that you can Read/Write/Speak (Please specify) | a) b) c) d) |

17.Details of Educational and Technical Qualifications

| Educational Qualification | University / Institution / Board | Month & Year of passing | Percentage of marks | Division/ Class/ Grade |
|----------------------------------|---|------------------------------------|----------------------------|-------------------------------|
| SSLC/X Std. | | | | |
| Certificate Course | | | | |
| Any other | | | | |

| | | |
|------------|--|--|
| 18. | Particulars of Driving License as evidenced by License issued by Transport Authority | |
| 19. | Particulars of experience in Tractor service/overhauling work as evidenced by Certificate issued by Recognised Institution | |
| 20. | Particulars of Work Experience as Tractor Driver | |

I hereby self-certify that the above information provided by me is true and correct to the best of my knowledge and belief.

Date:

Signature of the Applicant