## Application for English / Hindi \* Bi-monthly Typewriting Test to be held in the month of ......200 at Centre .....

## (To be filled in candidate's own handwriting)

Paste

An extra copy of the passport size photograph should be enclosed.

	Photograp
Name in full (in Block Letters) State whether Kumari or Smt.	
Date of Birth (in Christian era)	(dd/mm/yyyy)
Father's/ Husband's name and addres	ŝS
Name of the Ministry / Office where employed and the station where it is located.	
(a) Name of the post held : (Tick (3) th LDC from Group 'D' employees Seniority quota	e relevant box.) LDC from Group 'D' employees Examination, 200
LDC from Group 'D' employees	LDC from Group 'D' employees

At which of the following places do you wish to appear for the test: 6.

Hyderabad / Chennai \*

7. Medium opted for the Typewriting test:

English / Hindi \*

(\* Strike out whichever is not applicable)

8. Details of the Staff Selection Commission Typewriting Test at which you appeared last time.

SI. No.	Date of test	Roll no.	Place where the test was taken	Result (Give the speed, if qualified.)

I hereby declare that the statements made in this application are true to the best of my knowledge and belief.

Place:

Signature

Date:

\_\_\_\_\_

Name (in Block letters)

\_\_\_\_\_

## DEPARTMENTAL ENDORSEMENT

No.....Place ......dated

Certified that the particulars given above are correct.

Shri / Smt.	/ Kumari				is a	tempo	rary
/provisionally	confirmed	/quasi-permanent	LDC(DR)	/LDC	from	Group	'D'
employees Ex	am. LDC f	rom Group 'D' em	ployees (s	seniorit	y quo	ta) /LDC	on
compassionat	e grounds /	UDC /Assistant (DI	א)				
in the Office	of /Ministr	y of					
which is partie	cipating /Not	participating in the	e Central S	ecretar	iat Cle	rical Ser	vice
and is eligible	to take admi	ssion to the test is r	ecommend	led.			

Signature	:
Name	:
Designation	:
Ministry /Office	:

Place :....

Stamp/GenI.

This endorsement should be signed by an Officer not below the rank of Under Secretary or equivalent.