ANNEXURE-II APPLICATION FORM FOR COMMUNITY SUPPORT STAFF

ositi	on applied for –			
	CO. CLE.	Name of the GPLF:		
	e of the CLF:e of the Bank Branch (Bank Mitra):_			
A	Personal Information			
1	Full Name of the Applicant			
2	Sex		Paste recent	
3	Full Name of Father/ Husband		passport size colour photograph	
4	Full Name of Mother			
5	Date of Birth (DD/MM/YYYY)			
6	Age as on date of issue of notice (in Completed Years)			
7	Social Category (Please tick valid option))/ ST ()/ Minority (
8	Economic Category (Please tick valid option)	Poor () / EPVG () / R ()/Annual Income less than I	ation Card holder ()/ BP Rs.60,000/- ()	
9	Special Category (Please tick valid option)	PwD () / Orphan ()/ /P	VTG ()	
10	Current Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin		San San San	
11	Permanent Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin			
12	Name of All Name o			
13	1 1 1 1 Nombor			
14				

B. Educational Qualification (Self attested photocopy of Certificates & Mark sheets to be

	attached)				٠		
Sl. No.	Degree/Diploma/ Certificate Course/ Any other	Total Marks	Total Marks secured	% of marks secured	Instituti on/ College/ School	University / Board	Year of Passing
1	10 th Class						7.
2	12 th / Intermediate/ +2						
3	Graduation (Specify)/ +3						
4	Post Graduate (Specify)					-/tificate	course. If
	Any other qualifica Yes, mention below	tion, ITI	/additional	degree, dipl	loma/ degre	e/ certificate	Course.
5							
6							
7							
8			£				

	attached)	f attested photocopy of			
Sl. No.	Area of Experience	Name and address of SHG/ CLF/ GPLF/Department/ Organization/ govt. recognized Institution associated with	PERIOD		Total Period (In Years/ Months)
			From (MM/YYYY)	To (MM/YYYY)	Years/ Wonths)
1					
2					
3					4
4					

) .	Language Proficiency			Canalz
Sl. No.	Language	Read	Write	Speak
	Odia		**	
2	Hindi			
3	English			
4	Any Other (Specify)			

Documents attached (refer to Annexure-III to know type of documents to be attached)

Sl No.	Name of Document attached	Sl No.	Name of Document
1		7	
2		8	
3		9	
4		10	
5		11	
		12	
6			

Declaration

I do hereby, declare that information submitted by me is true to the best of my knowledge. I understand that, in case of false information, my candidature will be rejected at any given point of time and I am also liable for appropriate action.

		Signature
Date	Place	

ANNEXURE-III CHECKLIST OF DOCUMENTS TO BE SUBMITTED

SI. No.	Parameter	Self-Attested Documents to be submitted
a.	b.	C.
1.	Address Proof	Resident Certificate/Aadhaar Card/ Voter ID/ Electricity/ Water Bill/ Ration Card
2.	Identity Proof	Aadhaar Card/Voter ID/PAN Card/ Driving License/ Ration Card with Photo
3.	Age Proof	Birth Certificate/ 10th class certificate
4.	Educational Qualification	Mark sheet/ Board Certificate/ Diploma/Degree Certificate/ Post graduate certificate/ Any other qualification certificate from approved recognized institution
5.	SHG Member	Letter from President/Secretary of concerned SHG
6.	Social Category (SC/ST/Minority)	Caste Certificate
7.	Economic Category (Poor/EPVG (SECC 2011 Census data)	PIP Under OLM as per SECC-2011
8.	Ration card holder	Ration card issued by Competent Authority
9.	BPL	BPL card issued by Competent Authority
10.	Annual Income less than Rs. 60,000/	Income Certificate issued by Tahasildar
11.	Person with Disability	Disability Certificate from concerned government department
12.	Orphan	Orphan certificate from concerned Tahasildar (staying at home)/ DCPO (staying at child care institution)
13.	PVTG	Caste Certificate
14.	Community Cadre in intensive village/ GP under OLM	Letter from concerned CLF President/Secretary (in case of CRP-CM), GPLF President/Secretary in case of MBK, Bank Mitra, CRP-EP mentioning period for which candidate is/was engaged in intensive village/ GP under OLM
15.	CRP for mobilization round/ Senior CRP under OLM	Letter/ Certificate from BMMU/DMMU/SMMU, OLM mentioning the period of engagement

Ransita Behera

ଫପାଦିକା ସଫ ସହାୟକ ଗୋଷା ମହାଫଘ କୁଳିଅଣା, ମୟୁରଭଞ୍ଜ Nandini mahanta

ସଭାନେତ୍ରୀ ସ୍ପୟ ସହାୟକ ଗୋଷୀ ମହା**ଙ୍କଘ** କୁଳିଅଣା, ମୟୁରଭ**ଞ**