APPLICATION FORM To. The Child Development Project Officer, Affix Photograph ..... ICDS Project, Cachar. (self attested by the candidate) 1. Name of the Post 2. Name & no. of the Anganwadi Centre applied for 3. Name of Applicant in full (Block Letter) 4. Name of the Husband (in case of married) 5. Name of the Father/Guardian(in case of unmarried) 6. Full Residential Address : 7. Date of Birth 8. Age as on 01/01/2022 9. Caste: (Gen/SC/ST/ST(P)Minority) 10. Religion 11. Educational Qualification 12. Are you Physically Handicapped. (Yes or No) 13. Are you Married (Yes or No) 14. Are you Divorcee (Yes or No) 15. Are you widow (Yes or No ) 16. Other Qualification or any Experience 17. Name of the G.P./Municipal Board 18 Ward No. of the G.P./Municipal Board Note: Photocopies of the candidates credentials are to be attached alongwith the application form during the time of submission. SELF DECLARATION OF CANDIDATE I am a candidate for the post of Worker/Helper/Worker at Mini Anganwadi Centre-----

Date...... Full Signature of the Applicant