## **Urban Development Directorate, Uttarakhand**

Ad	vertisement no:									Dat	ted:			
1.	SCHEME/MISSION APPLIED FOR		Pradł		antri <i>l</i> or All-			- Hosu	ing			PH	ото	
2.	POST APPLIED FOR													
3.										_				
	Full Name (in block letter)													
4.	D . (D'.)			1.5		1 34	1 24	1.4	1,,					
	Date of Birth	D	D	M	M	Y	Y	Y	Y		ge as 1.07.	on 2024		
_														
5.	Gender													
6.	Gender													
0.	Nationality													
7.				I		ı			<u> </u>	I	I		<u> </u>	
	Father's / Husband's Name													
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8.	Mother 's Name													
9.														
	Address for Correspondence													

10	•															
	Permanent Addre	ess														
11	•	1			•								I	1		
	Telephone No:-		1	Mobile												
	relephone No		2	Landli												
				(with												
12			3	E-Mai	1											
12	Details of Educati	on and	Ted	chnical	Qualifi	catio	n (fro	om i	matr	ricula	tion/	onw	ards	;)		
	Examination University/Board/ Passed Institution/Council of Examination								ivision			Subjects				
					of Passing /			/Gra	'Grade							
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13	•										<u> </u>					
	Details of previou	ıs/curre	ent	employ	/ment?	Give	part	icul	ars k	elov	v:-					
	Organization			od of Service			Designation			Nature of			Total Monthly			
										Duties Performed			Emoluments			
	Fro		m	То	)				P	renomiea						
	(Additional Sheets	may b	e er	ıclosed	for oth	er de	etails	of	Expe	rien	ces)					
	Note: (Please also	o attac	h yo	our late	st deta	iled (	CV)									
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14			. •	•												
	If Selected, specify your minimum joining time															
	Johnnig time															

## 15. Languages Known (Mark in appropriate category)

a.	<b>English</b>	(Read)	(Write)	(Speak)
u.	LIISIIJII	111Caa <i>1</i>	1 0 0 1 1 1 1 1	IJDCGKI

**b.** Hindi (Read) (Write) (Speak)

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief and understand that in the event of any information found false or incorrect at any stage or not satisfying the eligibility criteria according to the requirement of the relevant advertisement my Candidature can be Cancelled, even after my appointment.

I undertake to abide by all the terms and conditions mentioned in the advertisement given by the department.

Place:		
		Signature of Candidate
Date:		
	Name:-	