MANIPUR PUBLIC SERVICE COMMISSION

APPLICATION FORM FOR APPEARING AT THE LIMITED DEPARTMENTAL EXAMINATION, 2017

Closing date for submission of application form: **03:00 p.m. of 13.12.2017.**
(The application shall be accompanied by an examination of Rs. 1000/- in the form of Demand Draft drawn in favour of Secretary, Manipur Public Service Commission)

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<thead>
<tr>
<th>For office use only</th>
<th>Affix one recent colour passport size photograph (3.5 cm x 4.5 cm)</th>
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<tr>
<td>Roll No</td>
<td>(DO NOT STAPLE)</td>
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PART-I (TO BE FILLED BY THE CANDIDATE’S OWN HANDWRITING)

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<thead>
<tr>
<th>No.</th>
<th>Description</th>
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<tr>
<td>1</td>
<td>Name in Full (Block Capital) (With JC NO in case of Jemadar)</td>
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<tr>
<td>2</td>
<td>EIN</td>
</tr>
<tr>
<td>3</td>
<td>Date of Birth</td>
</tr>
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<td>4</td>
<td>Name of Department</td>
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<td>5</td>
<td>Current Service/ Post</td>
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<td>6</td>
<td>Contact No</td>
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<td>7</td>
<td>Paper(s) for which he/she wishes to appear: 1) 2) 3) 4) 5) 6) 7) 8)</td>
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<td>8</td>
<td>(For Jemadar Only) i) Whether Outdoor Test has been passed or not?</td>
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<td>ii) If passed, please indicate official letter number (s), if any.</td>
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**Note I:** All fields are mandatory.
**Note II:** Application not signed by the candidate will be rejected.

**DECLARATION:** I do hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I also hereby declare that in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the examination, my candidature is liable to be cancelled.

Place: ___________________________  Signature of candidate

Date: ___________________________
PART-II (To be filled by the Head of Department/ Office in which the candidate is serving)

Certifies that the entries are found correct and forwarded to the Manipur Public Service Commission

Signature:

Designation:
(with seal)

Department/ Office

Phone No (s):