SIKKIM PUBLIC SERVICE COMMISSION GANGTOK APPLICATION FORM

B.R No					(_ (SBS)									Passport size photograph to be pasted & signed by the candidate. (not to be stapled)								
Sik	(2nos of identical photos to be submitted.) To The Secretary, Sikkim Public Service Commission, Gangtok – 737101.																						
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2.		(a)	Nan	ne o	f Fa	ther	:																
		(b)	Nan	ne o	f Mo	othe	er:																
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3.	DD	Dat		f Bir		ecor	ded \	in C		/ics			cate er: I		e [ı	- em	ale]	
4.		Age	e as	on ()1/0	7/20	012:																

5.	Permanent Address (with pin code):																					
6.	Sik	kim	Subje	ect Ce	ertifi	icate,	/Cer	tifica	ate d	of Id	enti	ficat	ion	Υ	⁄es				No			
7.	Ca	tego	ory:	UR			BL ST (Lin					Limb	nboo/Tamang)									
	OBC MBC SC																					
8.	8. Present address for communication (with pin code):																					
9.	. Residential Telephone No. Mobile No. (Candidate)																					
11.	Pai	rticu	lars o		min		n pas	sed														
SI.	Exar				Na	me o	f Boa	rd.			arks	_		ull		ercer	_		Year of Division			
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	qual	ifica	tion																			
12.	Local Employment Card: Yes No Local Employment Card Number																					
13.	13. If employed on regular basis, give details																					
	Designation:																					
	Deptt./Office:																					
No objection certificate from employer enclosed: Yes No																						

14.	If Home Guard, NOC from the emp	loyer:	Υe	es 🗌	No								
15.	Choice of two optional subjects from the list appended in the advertisement.		(i)(ii)										
	Note: Choice once given will not be allowed to change at any stage. No over writing / double writing is permitted.												
<u>DECLARATION</u>													
I hereby declare that the information furnished above is true to the best of my knowledge and belief. I understand that in the event of any information given is found to be incorrect, my candidature shall be rejected.													
	I have carefully read the provision ake to abide by them.	n contained	in the adv	vertisement	and I hereby								
Dated:			-	of the Candi ull form	date in								