

APPLICATION FOR THE POST OF "

Ref: Notification No. _____/2024 of the office of the Legal Aid Defense Counsel System, Ongole,
Prakasam District

STATE _____

DISTRICT _____

Application No. _____

(For Office use)

Photo to be
affixed duly
attested by
Gazetted officer

1.	Full Name of the Applicant (In Block Letters)	:			
2.	Father's/Husband's Name	:			
3.	Permanent Address	:			
4.	Address for Communication (with Mobile Number & e-mail ID)	:			
5.	Sex (male/Female)	:			
6.	Date of Birth	:			
7.	Age (As on 01.07.2024 (As per SSC Certificate)	:	Year	Month	Days
8.	Nationality	:			
9.	Religion	:			
10.	Caste/Category (OC,BC,SC,ST & PH with Sub-Groups)	:			
11.	Educational Qualification 1. Academic 2. Technical 3. Other (if any)	:			
12.	Previous Experience if any	:			

I solemnly declare that the above information submitted by me is true to the best of my knowledge. If any information submitted by me is found to be false, action may be taken against me.

STATION: Ongole

SIGNATURE OF THE APPLICANT

DATE:

NB: Necessary attested copies of the certificates with regard to age, caste, educational and technical qualifications and service certificates shall be enclosed to this application.

CALL LETTER FOR THE POST OF

ON OURSOURCING

BASIS IN LEGAL AID DEFENSE COUNSEL SYSTEM, ONGOLE

<u>ROLL NUMBER : FOR OFFICE USE ONLY</u>		Affix recent passport Size colour photograph
<u>(S.No's 1 to 4 to be filled by candidate)</u>		
1.	Name of the Candidate (in Block letters)	
2.	Father's / Husband's name	
3.	Date of Birth & Age as on 01-07-2024 in years	
4.	Aadhar Number	
5.	Category (OC, BC, SC, ST & PH with Sub Groups)	
6.	Date & Time of interview (to be filled by office)	
7.	Venue of interview (to be filled by office)	

SIGNATURE OF THE CANDIDATE

SIGNATURE OF THE OFFICER WITH SEAL

CALL LETTER FOR THE POST OF

ON OUTSOURCING

BASIS IN LEGAL AID DEFENSE COUNSEL SYSTEM, ONGOLE

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SIGNATURE OF THE CANDIDATE

SIGNATURE OF THE OFFICER WITH SEAL