BIHAR MADHYMIK SHIKSHA PARISHAD

Application for the post of "ASSISTANT RESOURCE PERSON" under District Level Management Structure of RMSA

(Before filling in application form, applicants are required to go through the instructions/details published in the advertisement, a copy of it has already been uploaded on the website)

Self attested photograph of candidates

PERSONAL DETAILS:

Name of the applicant:

Father's Name:

Husband's Name: (If Applicable)

Date of Birth: - - (DD-MM-YYYY)

Age completed as on 01.04.2013:

Retired Person: YES NO

Gender: (Write 'M' for Male & 'F' for Female)

Nationality:

Marital Status: Married Unmarried

Mode of Appointment : Short Term Contract Short Term Deputation

Write below the name of district as per the order of preference where candidate desires to be posted. Filling in order of preference of all the 38 Districts is mandatory.

Order of pref.	Name of the district	Order of pref.	Name of the district	Order of pref.	Name of the district	Order of pref.	Name of the district
1		11		21		31	
2		12		22		32	
3		13		23		33	
4		14		24		34	
5		15		25		35	
6		16		26		36	
7		17		27		37	
8		18		28		38	
9		19		29			
10		20		30			

Category : UR MBC/EBC BC SC ST

BPL : YES NO

Caste Certificate Issuing Office:

Date of Issue Caste Certificate: (DD-MM-YYYY)

If Person with Disability: ☐ YES ☐ NO

Type of Disability:

(Write: 'VI' for Blindness or low vision, 'HI' for Hearing Impairment, 'OC' for Locomotors Disabilities & Cerebral Palsy)

Percentage of disability: %

Address of candidate

for Correspondence:

District:

State: PIN Code:

Permanent Address:

District:

State: PIN Code:

CONTACT DETAILS: (mandatory)

Mobile Number**:** **OR** Phone Number:

Email ID:

QUALIFICATION DETAILS (AS ON 01.04.2013):

Exam Passed	**Subject /Stream**	**University/Board**	**Date of Passing**	**% of Marks**	**Class/Grade/ Division**
Graduation :					
Post Graduation :					
Professional Qualification					
Others :					

Post Qualification work experience details as on 01.04.2013 (Start from present Employer):

Name of the Employer	**Designation and Rank if any**	**Total Period of Service**		**Nature of duties performed**	**Years of Service (YY/MM)**
		From	**TO**		

Total Experience (in months):

Application Fee (NOT APPLICABLE FOR SC / ST / BPL / DISABLED)

Demand Draft Number / UTR No. (Incase of NEFT/ RTGS Remittance): ☐

Bank Name: ☐

Date of Demand Draft / UTR: ☐

Amount: ☐

(In case of payment through Demand Draft, send the demand draft with this application. In case of fee remittance made through NEFT/RTGS counterfoil duly acknowledged by bank with UTR no. be sent with this application. SC / ST / BPL / DISABLED are exempted from application fee, however they will have to submit relevant certificate.)

Note : Please mention Post Name on the envelope before sending the application to BMSP office.

DECLARATION BY THE CANDIDATE

I, hereby solemnly and sincerely affirm that all the particulars filled in by me in the Application Form are true and correct to the best of my knowledge and belief. I have read the information & instructions mentioned in the advertisement and I shall abide by the terms & conditions. However, if any information furnished herein is found fraudulent, incorrect or untrue I understand that, I will be liable to be prosecuted in the court of law and loose my candidature.

I also hereby declare that I have never been punished nor disciplinary proceeding are pending against me.

I accept the Terms & Conditions of Bihar Madhyamik Shiksha Parishad

Place: .....

Signature : .....

Date: .....

Name of the Candidate : .....