General Information of Candidate for the Post of TGT (Sanskrit) Male Post code: - 192/1116/124 and Checklist of uploading the documents.

Post Code	Admit Card No.	Roll Number	
116/12		Tion Hambol	Photograph
			r -
Name of Candid	date		
Father's Name	· ·	· · · · · · · · · · · · · · · · · · ·	1
Name of Spous	0		
(in married case	e)		
Permanent Add	ress		
			,
Correspondence	e Address		
	· · · · · · · · · · · · · · · · · · ·		
Mobile No. Aadhar No.	•		
Addital No.	*		
Whether upload	ded copy of Aadhar card:	; -	Yes No
Information rela	ating to Date of Birth		
Date of Birth (DI			
Date of Birtii (Dt	D/MM/YYYY) :		
Whether upload	ed copy of Board Certificat	e In support of date of birth	
(Tick √ in	the relevant box)		Yes No
Age 25 on 15 06	.2012 :		
Age as on 15.00	.2012	vi	in the second se
		Sig	gnature of the Candidat
		Name of the candidate:-	

7. Are you seeking	age relaxation
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Yes No

7.1 If yes, then specify the age relaxation category:-

A. In case of SC/ST/OBC Number and date of issuance of SC/ST/OBC certificate: Designation of issuing authority Tehsil/District of issuing authority State of issuing authority Note:- OBC (Delhi) certificate for grant of benefit of OBC reservation issued in terms of circular No. F.19(10)/2001/S-III/Pt. File/2278-2285 dated 27/07/2007 and No. F. 19 (01)/2012/S.IV/12 1258 dated 28/07/2016 issued by the Service Department, GNCTD shall only be treated a valid. B. In case of PH (OH/VH/HH) Number and date of issuance of Disability Certificate: Designation of issuing authority Hospital/Medical Institution of issuing authority Tehsil/District of issuing authority State of issuing authority C. In case of EXSM:- Date of Joining of Defence Service Date of Discharge/Retirement from Defence Service Total length of service rendered in Defence Passon for discharge Name of Unit/Office at the time of Discharge		OBC (Delhi)	SC	ST	PH {OH/VH/HH}	Govt. Servant	Any Other
Number and date of issuance of SC/ST/OBC certificate					te as per 7.1:	Yes	No
ii) Designation of issuing authority Tehsil/District of issuing authority State of issuing authority Note:- OBC (Delhi) certificate for grant of benefit of OBC reservation issued in terms of circular No. F.19(10)/2001/S-II/Pt. File/2278-2285 dated 27/07/2007 and No. F. 19 (01)/2012/S.IV/12 1258 dated 28/07/2016 issued by the Service Department, GNCTD shall only be treated a valid. B. In case of PH (OH/VH/HH) Number and date of issuance of Disability Certificate Designation of issuing authority Hospital/Medical Institution of issuing authority Tehsil/District of issuing authority State of issuing authority C. In case of EXSM:- Date of Joining of Defence Service Date of Discharge/Retirement from Defence Service Date of Discharge/Retirement from Defence Neason for discharge Rank held at the time of discharge Name of Unit/Office at the time of Discharge D. In case of Departmental Candidate Name of current Government Office/organization where employed Address of the current Gov office / Organization where employed Whether in Central Govt. or State Govt. If State, Name of the State: V) If Central, name of the Ministry. Vi) Whether the office/organization is Autonomous Body Vii) Date of substantive appointment on regular Basis (Attach copy of appointment order)	Α.	In case o	f SC/ST/OBC				
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C. In case of EXSM:- i) Date of Joining of Defence Service ii) Date of Discharge/Retirement from Defence Service iii) Date of Discharge/Retirement from Defence Service iii) Total length of service rendered in Defence iv) Reason for discharge v) Rank held at the time of discharge vi) Name of Unit/Office at the time of Discharge Address of the Unit/Office at the time of discharge D. In case of Departmental Candidate i) Name of current Government Office/organization where employed ii) Address of the current Govt. office / Organization where employed iii) Whether in Central Govt. or State Govt. Central State iv) If State, Name of the State: v) If Central, name of the Ministry: vi) Whether the office/organization is Autonomous Body vii) Date of substantive appointment on regular Basis (Attach copy of appointment order)	iv)	Tehsil/District of issuing authority					
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vi) Whether the office/organization is Autonomous Body :- Yes No vii) Date of substantive appointment on regular Basis :- (Attach copy of appointment order)	iv)	If State, N	Name of the Sta	ite:		i-	
vii) Date of substantive appointment on regular Basis :	V)	If Central	, name of the M	linistry:		;= <u> </u>	
vii) Date of substantive appointment on regular Basis :	vi)	Whether	the office/organ	ization is Auto	nomous Body	- Yes N	lo
	vii)	Date of s	ubstantive appo	ointment on reg	gular Basis		
viii) Designation of the current post:		(Attach c	opy of appointm	nent order)			
	viii)	Designat	ion of the curre	nt post:			

Signature of the Candidate

Name of the candidate:-____

Roll No.