



## Application form for “Library Trainees”

Name:

Father's Name :

Date of Birth:

Permanent Address:

Affix a passport-size photo

Correspondence Address:

Gender:

E-Mail (mandatory):

Mobile Number (mandatory):

Qualification Details (10 <sup>th</sup> onwards):				
Sl. No	Name of the Examination	University/Board/Institute	Year of Passing	Division/ Class

<b>Experience Details:</b>						
<b>Sl. No.</b>	<b>Company/Firm/Institute/Any Other Organization</b>	<b>Date of Joining</b>	<b>Date of Leaving</b>	<b>Salary per month</b>	<b>Field of Experience</b>	<b>Total Experience</b>

I hereby declare that the entries in this form are true to the best of my knowledge and belief, I understand that my candidature will be canceled if any of the information is found to be false or incorrect. Further, if selected, I will abide by the rules and regulations of the Institute and also the directions given to me from time to time.

**Date:**  
**Place:**

**Signature**