## **District Child Protection Unit, Virudhunagar.**

## Application form for the post of (Data Analyst)

| 1.  | Name of the Applica   |             |                     |   |                       |
|-----|---|-------------|---------------------|---|-----------------------|
|     | (IN CAPITAL LET   | TERS)       |                     |   |                       |
| 2.  | Name of the Father  |             |                     | Recent<br>Pass-port size                        |                       |
| 3.  | Date of Birth   |             |                     | photograph of<br>the applicant to<br>be affixed |                       |
| 4.  | Age   |             |                     |   |                       |
| 5.  | Native District   |             |                     |   |                       |
| 6.  | Marital Status  |             |                     |   |                       |
| 7.  | Address for Communication                                     |             |                     |   |                       |
|     | (IN CAPITAL LET   |             |                     |   |                       |
|     |   |             |                     |   |                       |
| 8.  | Phone Number / E-mail / Cell No                               |             |                     |   |                       |
| 9.  | Education Qualification with copy of supporting documents     |             |                     |   |                       |
| 10. | Additional Qualification with copy of<br>Supporting documents |             |                     |   |                       |
| 11. | Community OC/BC/MBC/SC/ST                                     |             |                     |   | ſ                     |
| 12. | Details of Working Experience with supporting documents       |             |                     |   |                       |
|     | (Relevant experience certificates should be attached)         |             |                     |   |                       |
|     | Name of the Designation                                       |             | Years of experience |   |                       |
|     | organization  | Designation | From                | То  | No. of years & months |
|     |   |             |                     |   |                       |
|     |   |             |                     |   |                       |
|     |   |             |                     |   |                       |
|     |   |             |                     |   |                       |
|     |   |             |                     |   |                       |

\*Incomplete application and application without relevant supporting documents will be summarily rejected without any prior information.

I ------ hereby declare that the particulars furnished by me in this application form are true to the best of my knowledge and belief. In case any information is found to be incorrect, my candidature shall liable to be rejected.