

ANNEXURE-II APPLICATION FORM FOR COMMUNITY SUPPORT STAFF

Position applied for –

Name of the CLF: _____

Name of the GPLF: _____

Name of the Bank Branch (Bank Mitra): _____ **Name of the Block:** _____

A Personal Information		
1	Full Name of the Applicant	Paste recent passport size colour photograph
2	Sex	_____
3	Full Name of Father/ Husband	_____
4	Full Name of Mother	_____
5	Date of Birth (DD/MM/YYYY)	_____
6	Age as on date of issue of notice (in Completed Years)	_____
7	Social Category (Please tick valid option)	Gen (<input type="checkbox"/>) / SEBC (<input type="checkbox"/>) / SC (<input type="checkbox"/>) / ST (<input type="checkbox"/>) / Minority (<input type="checkbox"/>)
8	Economic Category (Please tick valid option)	Poor (<input type="checkbox"/>) / EPVG (<input type="checkbox"/>) / Ration Card holder (<input type="checkbox"/>) / BPL (<input type="checkbox"/>) / Annual Income less than Rs.60,000/- (<input type="checkbox"/>)
9	Special Category (Please tick valid option)	PwD (<input type="checkbox"/>) / Orphan (<input type="checkbox"/>) / PVTG (<input type="checkbox"/>)
10	Current Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin	_____
11	Permanent Address with name of Village, GP, Post Office, Police Station, Block, District, State, Pin	_____
12	Telephone/mobile Number (Mandatory)	_____
13	Alternate telephone/mobile Number (Optional)	_____
14	Email ID (optional)	_____

B. Educational Qualification (Self attested photocopy of Certificates & Mark sheets to be attached)	
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Sl. No.	Degree/Diploma/ Certificate Course/ Any other	Total Marks	Total Marks secured	% of marks secured	Institution / College/ School	University / Board	Year of Passing
1	10 th Class						
2	12 th / Intermediate/ +2						
3	Graduation (Specify)/ +3						
4	Post Graduate (Specify)						
	Any other qualification, ITI/additional degree, diploma/ degree/ certificate course. If Yes, mention below						
5							
6							
7							
8							

C.	Experience (Self attested photocopy of experience certificates and relevant documents to be attached)				
Sl. No.	Area of Experience	Name and address of SHG/ CLF/ GPLF/Department/ Organization/ govt. recognized Institution associated with	PERIOD		Total Period (In Years/ Months)
			From (MM/YYYY)	To (MM/YYYY)	
1					
2					
3					
4					

D.	Language Proficiency (Put Tick Mark √ in appropriate column)
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Sl. No.	Language	Read	Write	Speak
1	Odia			
2	Hindi			
3	English			
4	Any Other (Specify)			

Documents attached (refer to *Annexure-III* to know type of documents to be attached)

Sl No.	Name of Document attached	Sl No.	Name of Document attached
1		7	
2		8	
3		9	
4		10	
5		11	
6		12	

Declaration

I do hereby, declare that information submitted by me is true to the best of my knowledge. I understand that, in case of false information, my candidature will be rejected at any given point of time and I am also liable for appropriate action.

Date

Place

Signature



Cut from Here

Acknowledgement

Application No: _____

I **Ms/Smt**..... acknowledge receipt of application of
Ms/Smt..... for the position of for
..... **CLF** **GPLF**.....
under..... **BLF** on date..... at

Full Name & Signature of receiver

With seal and stamp

Mulat

ANNEXURE-III CHECKLIST OF DOCUMENTS TO BE SUBMITTED

Sl. No.	Parameter	Self-Attested Documents to be submitted
a.	b.	c.
1.	Address Proof	Resident Certificate/Aadhaar Card/ Voter ID/ Electricity/ Water Bill/ Ration Card
2.	Identity Proof	Aadhaar Card/Voter ID/PAN Card/ Driving License/ Ration Card with Photo
3.	Age Proof	Birth Certificate/ 10 th class certificate
4.	Educational Qualification	Mark sheet/ Board Certificate/ Diploma/Degree Certificate/ Post graduate certificate/ Any other qualification certificate from approved recognized institution
5.	SHG Member	Letter from President/Secretary of concerned SHG
6.	Social Category (SC/ST/Minority)	Caste Certificate
7.	Economic Category (Poor/EPVG (SECC 2011 Census data))	PIP Under OLM as per SECC-2011
8.	Ration card holder	Ration card issued by Competent Authority
9.	BPL	BPL card issued by Competent Authority
10.	Annual Income less than Rs. 60,000/	Income Certificate issued by Tahasildar
11.	Person with Disability	Disability Certificate from concerned government department
12.	Orphan	Orphan certificate from concerned Tahasildar (staying at home)/ DCPO (staying at child care institution)
13.	PVTG	Caste Certificate
14.	Community Cadre in intensive village/ GP under OLM	Letter from concerned CLF President/Secretary (in case of CRP-CM), GPLF President/Secretary in case of MBK, Bank Mitra, CRP-EP mentioning period for which candidate is/was engaged in intensive village/ GP under OLM
15.	CRP for mobilization round/ Senior CRP under OLM	Letter/ Certificate from BMMU/DMMU/SMMU, OLM mentioning the period of engagement