

**APPLICATION FORM FOR THE POST OF LIFT OPERATOR IN SESSIONS DIVISION BHIWANI.**

To  
The District & Sessions Judge  
Bhiwani.

Affix Latest passport size colored photograph of the candidate attested by a Gazetted Officer

**Subject:- Application for the post of Lift Operator.**

Name of Candidate	:				
Father's / Husband's Name	:				
Date of Birth	:				
Age as on 01.01.2024	:				
Sex(Male/Female)	:				
Nationality	:				
Complete Permanent Address with Pin code and State	:				
Complete Correspondence Address with Pin code and State	:				
Category (Caste)	:				
<b>Academic Qualification</b>					
Examination/Degree	Board/ University	Year of passing	Divn/Class	%age of Marks	Grade Point
10 <sup>th</sup> /Matric					
I.T.I.					
Graduation					
Other qualifications, if any)					
Contact/Mobile Number	:				
Email I.D.	:				

**Note:-Attach self-attested photocopy of all relevant documents.**

I, \_\_\_\_\_ son/daughter/wife of Shri. \_\_\_\_\_, hereby declare that the information given above and in the attached documents are true and correct to the best of my knowledge and belief and nothing has been concealed therein. I understand that if the information given by me is found false/not true, I may be prosecuted under the relevant provisions of law.

Date:.....  
Place:.....

**(Signature of Candidate)**

**APPLICATION FORM FOR THE POST OF GENERATOR OPERATOR IN SESSIONS DIVISION BHIWANI.**

To  
The District & Sessions Judge  
Bhiwani.

Affix Latest passport size colored photograph of the candidate attested by a Gazetted Officer

**Subject:- Application for the post of Generator Operator.**

Name of Candidate	:				
Father's / Husband's Name	:				
Date of Birth	:				
Age as on 01.01.2024	:				
Sex(Male/Female)	:				
Nationality	:				
Complete Permanent Address with Pin code and State	:				
Complete Correspondence Address with Pin code and State	:				
Category (Caste)	:				
<b>Academic Qualification</b>					
Examination/Degree	Board/ University	Year of passing	Divn/Class	%age of Marks	Grade Point
10 <sup>th</sup> /Matric					
I.T.I.					
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Other qualifications, if any)					
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Date:.....  
Place:.....

**(Signature of Candidate)**