

1. Name of the Applicant _____
2. Government No. _____
3. Name of the Employer _____
4. Employer _____
5. Father's Name _____
6. Mother's Name _____
7. Address No. & Street No. _____
8. Telephone No. _____

9. Signature (Please fill)

1. _____
2. _____
3. _____
4. _____

5. **Declaration:** I hereby declare that I am not a member of any other political party or organization and I am not a member of any other political party or organization.

Note: The applicant has to fill up the form and submit it to the concerned authority in the prescribed manner. The applicant has to fill up the form and submit it to the concerned authority in the prescribed manner.

Note: The Government has decided to issue a "Certificate of Membership of the Government" to the applicant.

DECLARATION OF THE APPLICANT & AUTHORITY

I, the undersigned, hereby declare that I am not a member of any other political party or organization and I am not a member of any other political party or organization.

Signature of the Applicant: _____ **Signature of the Authority:** _____

DECLARATION OF THE CONTROLLER OF EXAMINATIONS

I, the undersigned, hereby declare that I am not a member of any other political party or organization and I am not a member of any other political party or organization.