

PROFORMA OF APPLICATION FOR THE POST OF
"LIBRARY ASSISTANT (JUNIOR JUDICIAL ASSISTANT)"

Advt. No. - **03**/Library Assistant/2026

Dated - **19.06.2026**

1. Full Name of the applicant

(In Hindi) :

(BLOCK Letters in English) :

Paste latest
Taken on or
After 01.01.2026 Colored
Passport size Photograph
duly self attested

2. Father's/Husband's Name

(In Hindi) :

(BLOCK Letters in English) :

3. Date of Birth

(In English in Words) :

(In English in figure) :

4. Age as on **01/01/2026**

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Year Month Day

5. Sex -

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(mention code 1 for Male 2 for Female & 3 for Third Gender)

6. Whether, resident of Chhattisgarh - Yes / No

(If yes, enclose the self attested copy of resident certificate issued by the competent authority.)

7. Educational qualification :

S. No.	Name of Exam.	Board/ University	Year of passing	Div./%/Aggri.
1.	10th			
2.	12th			
3.	Graduation			
4.	Post Graduation			
5.	Library Science			
6.	Other			

8. Whether, the candidate is serving in : Yes / No
govt./semi govt. organization
(If yes, application must be sent through proper channel
or accompanied by No Objection Certificate of the department
concerned, issued after publication of this advertisement)

9. Whether : (please tick whichever is applicable)

SC	ST	OBC	UNRESERVED

(In case of SC/ST/OBC, enclose the self attested copy of permanent Caste Certificate issued by the competent authority.)

10. Whether, Physically Disabled (Divyang) : Yes/No
If Yes, mention type and percentage of Disability :
(Attach certificate issued by competent authority).

11. Whether any Criminal case is registered/ pending/arrested/convicted against the applicant in any Court, : Yes/No
(If yes, give clear and complete details).....
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12. Whether the applicant has been dismissed or removed from service by any Court/ Government or Statutory Body or Local Authority, Yes/No
(If yes, give clear and complete details).....
.....

13. Whether the applicant has been temporarily or permanently disqualified or banned from Government Service by the High Court or any other Government Department.

Yes/No
(If yes, give clear and complete details).....
.....

14. Postal address :
:
:

15. Permanent address :.....
:.....
:.....

16. E-mail :.....

17. List of enclosures :-

1. 2. 3.
4. 5.

(Signature of Applicant)

DECLARATION

I, the above-named applicant, do here declare that the statements made in this application are true, complete and correct to the best of my personal knowledge and belief and that I have not suppressed any material fact. If at any time, either during the course of recruitment or after joining services, it is discovered that any of the information furnished is incorrect or any material fact was suppressed, my candidature shall be liable to be rejected/ services shall be liable to be terminated, as the case may be.

(Signature of Applicant)

Place:

Date: