

INSTRUCTIONS FOR FORM FILL UP

1. READ ALL INSTRUCTIONS CAREFULLY.
2. ENTER ALL DETAILS CAREFULLY.
3. AFTER CLICK ON “**SAVE AS DRAFT**” BUTTON , AFTER THAT IF ANY MISTAKE DURING FORM SAVING AS DRAFT YOU CAN EDIT BY CLICKING ON “**EDIT**” BUTTON AND “**UPDATE**” .
4. IF YOU ENTER ALL DETAILS CORRECT THEN CLICK ON “**FINAL LOCK**” BUTTON
5. AFTER THAT YOU CAN VIEW THE COMPLETE DETAILS, FOR PRINTING CHALAN CLICK ON “**CLICK HERE FOR PRINT YOUR APPLICATION FORM WITH CHALAN**”.
6. ONCE FORM SUBMITTED, NO MODIFICATION WILL BE ALLOWED.
7. THE FORMULA USED FOR CONVERSION OF CGPA OF A CANDIDATE INTO EQUIVALENT PERCENTAGE WILL BE DECIDED BY RELEVANT UNIVERSITY.KINDLY CONTACT WITH YOUR UNIVERSITY.
8. APPLICANT CAN ALSO MAKE DEMAND DRAFT IN THE FAVOUR OF **DDC GIRIDIH** , PAYABLE AT **GIRIDIH**.
9. SUBMIT YOUR COMPLETE DETAILS WITH FORM TO “**DISTRICT RURAL DEVELOPMENT AGENCY (DRDA) GIRIDIH, PIN-815301**”.
10. FOR ANY QUERY, KINDLY CONTACT-
 - a) ddc-gir@nic.in Phone No- 06532 222572
 - b) jhrgir@nic.in Phone No- 06532 223097



District Rural Development Agency Giridih

Giridih, Jharkhand- India

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*** Kindly Fill All Details Very Carefully.**

Online Registration form

Select Post (पद का चयन) *	Block Programme Officer ▼
Candidate's Name(अभ्यर्थी का नाम) *	TEST Note: Enter Name as recorded in the Matriculation Examination certificate. (Please do not use any prefix such as Mr. or Ms. etc.)
Father's/Husband's Name(पिता/पति का नाम) *	TEST Note: Enter Father Name as recorded in the Matriculation Examination certificate. (Please do not use any prefix such as Shri or Dr. etc)
Date Of Birth(जन्म तिथि) *	1995-05-10 <input type="text"/> 22 yr 0 m 22 days ▼ Note: Enter Date Of Birth as recorded in Matriculation Examination Certificate
Gender(लिंग) *	Male ▼
Caste Community(जाति) *	GEN ▼
Physical Handicap(दिव्यांग) *	Yes ▼ 30 <input type="text"/> If Yes Than Enter Your Physical Handicap Percentage.
Marital Status(वैवाहिक स्थिति) *	Married ▼
Correspondence Address(वर्तमान पता) *	TEST1
Permanent Address(स्थायी पता) *	TEST1
Aadhaar No(आधार न.) *	676756756756 Note: Enter valid Aadhaar Number. Once Aadhar will be registered it will not further used for registration in same Post.
Mobile No.(मोबाईल न.) *	+91 5675676465 Note: Enter valid Mobile Number.
Email Id (ईमेल आई डी) *	vcb@gmail.com

Educational Qualification *

S.N	Exam Name	Course Type	Course Stream	Name Of University / Institute	Obtained Marks	Total Marks	Percentage
01	Matriculation*			TEST1	600	1200	50.00
02	Intermediate*	Arts ▼	TEST1	TEST1	500	1100	45.45
03	Graduation*	BCA ▼	TEST1	TEST1	890	1500	59.33
04	Others	TEST1	TEST1	TEST1	800	1000	80.00

Work Experience Details

#	Organisation Type	Organisation Name	Designation	Roles and Responsibility	Experience (In Month)
01	Private Sector ▼	TEST1	TEST1	TEST1	34
02	Government Sector ▼	TEST1	TEST1	TEST1	12
03	Government Sector ▼	TEST1	TEST1	TEST1	23
Total Experience In Month					69

Demand Draft Details *

#	Name Of Bank*	Demand Draft No *	Amount *	Date *
01	TEST1	454434	000	2017-08-02 <input type="text"/>

I confirm that the filled information are correct as per my knowledge.

[Save As Draft](#)



District Rural Development Agency Giridih

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District Rural Development Agency Giridih

(Application Form)



1. पद का नाम: Block Programme Officer
2. अभ्यर्थी का नाम: TEST
3. पिता/पति का नाम : TEST
4. जन्म तिथि : 10-May-1995 (22 yr 0 m 22 days)
5. लिंग : Male
6. मोबाइल न. : 5675676465
7. आधार न. : 676756756756
8. वैवाहिक स्थिति : Married
9. कोटी : GEN
10. दिव्यांग : Yes 30

पंजीयन संख्या :
DRDA90000001

Affix Self Attested
Passport Size
Recent Photograph

11. वर्तमान पता: TEST1

12. स्थायी पता: TEST1

13. शैक्षणिक योग्यता

क्र०	परीक्षा का नाम	विश्वविद्यालय/संस्थान का नाम	प्राप्त अंक	कुल अंक	प्राप्तांक का प्रतिशत
I	Matriculation	TEST1	600	1200	50.00
II	Inter (Arts)	TEST1	500	1100	45.45
III	BCA(TEST1)	TEST1	890	1500	59.33
IV	Others (TEST1)	TEST1	800	1000	80.00

14. अनुभव का विवरणी

क्र०	कार्यालय का प्रकार	कार्यालय का नाम	पद का नाम	भूमिका	कार्य अनुभव
I	Private Sector	TEST1	TEST1	TEST1	34
II	Government Sector	TEST1	TEST1	TEST1	12
III	Government Sector	TEST1	TEST1	TEST1	23

Total Experience in Months : 69 Months

बैंक का नाम	बैंक ड्राफ्ट न.	ड्राफ्ट की रकम	ड्राफ्ट की तिथि
TEST1	454434	000	02-Aug-2017

[Edit Here](#)

[Final Submit](#)



*** Kindly Edit All Details Very Carefully.**

Online Registration form

Select Post (पद का चयन) *	Block Programme Officer ▼
Candidate's Name(अभ्यर्थी का नाम) *	TEST <small>Note: Enter Name as recorded in the Matriculation Examination certificate. (Please do not use any prefix such as Mr. or Ms. etc.)</small>
Father's/Husband's Name(पिता/पति का नाम) *	TESTQ <small>Note: Enter Father Name as recorded in the Matriculation Examination certificate. (Please do not use any prefix such as Shri or Dr. etc)</small>
Date Of Birth(जन्म तिथि) *	1995-05-10 <input type="text"/> 22 yr 0 m 22 days ▼ <small>Note: Enter Date Of Birth as recorded in Matriculation Examination Certificate</small>
Gender(लिंग) *	Male ▼
Caste Community(जाति) *	BC2 ▼
Physical Handicap(दिव्यांग) *	Yes ▼ 30 <small>If Yes Than Enter Your Physical Handicap Percentage.</small>
Marital Status(वैवाहिक स्थिति) *	Unmarried ▼
Correspondence Address(वर्तमान पता) *	TEST1
Permanent Address(स्थायी पता) *	TEST1
Aadhaar No(आधार न.) *	676756756756 <small>Note: Enter valid Aadhaar Number. Once Aadhar will be registered it will not further used for registration.</small>
Mobile No.(मोबाईल न.) *	+91 5675676465 <small>Note: Enter valid Mobile Number.</small>
Email Id(ईमेल आई डी) *	vcb@gmail.com

Educational Qualification *

S.N	Exam Name	Course Type	Course Stream	University/Institute	Obtained Marks	Total Marks	%age
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Work Experience Details

S.N	Organisation Type	Organisation Name	Designation	Roles and Responsibility	Experience
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03	Government Sector ▼	TEST1	TEST1	TEST1	23
Total Experience In Month					69

Demand Draft Details *

#	Name Of Bank*	Demand Draft No *	Amount *	Date *
01	TEST1	454434	100	08/02/2017

I confirm that the filled information are correct as per my knowledge.

Update



District Rural Development Agency Giridih

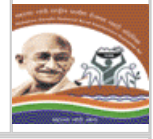
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(Application Form)



1. पद का नाम: Block Programme Officer
2. अभ्यर्थी का नाम: TEST
3. पिता/पति का नाम : TESTQ
4. जन्म तिथि : 10-May-1995 (22 yr 0 m 22 days)
5. लिंग : Male
6. मोबाइल न. : 5675676465
7. आधार न. : 676756756756
8. वैवाहिक स्थिति : Unmarried
9. कोटी : BC2
10. दिव्यांग : Yes 30

पंजीयन संख्या :
DRDA90000001

Affix Self Attested
Passport Size
Recent Photograph

10. वर्तमान पता: TEST1

11. स्थायी पता: TEST1

12. शैक्षणिक योग्यता

क्र०	परीक्षा का नाम	विश्वविद्यालय/संस्थान का नाम	प्राप्त अंक	कुल अंक	प्राप्तांक का प्रतिशत
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बैंक का नाम	बैंक ड्राफ्ट न.	ड्राफ्ट की रकम	ड्राफ्ट की तिथि
TEST1	454434	100	02-Aug-2017

[Edit Here](#)

[Final Lock](#)



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Demand Draft Details *

#	Name Of Bank*	Demand Draft No *	Amount *	Date *
01	TEST1	454434	100	08/02/2017

I confirm that the filled information are correct as per my knowledge.

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District Rural Development Agency Giridih

(Application Form)



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9. कोटी : BC2
10. दिव्यांग : Yes 30

पंजीयन संख्या : DRDA90000001

Affix Self Attested
Passport Size
Recent Photograph

11. वर्तमान पता: TEST1

12. स्थायी पता: TEST1

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क्र०	परीक्षा का नाम	विश्वविद्यालय/संस्थान का नाम	प्राप्त अंक	कुल अंक	प्राप्तांक का प्रतिशत
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III	BCA(TEST1)	TEST1	890	1500	59.33
IV	Others ()	--NA--	--NA--	--NA--	

14. अनुभव का विवरणी

क्र०	कार्यालय का प्रकार	कार्यालय का नाम	पद का नाम	भूमिका	कार्य अनुभव
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बैंक का नाम	बैंक ड्राफ्ट न.	ड्राफ्ट की रकम	ड्राफ्ट की तिथि
TEST1	454434	100	02-Aug-2017

मैं घोषणा करता/करती हूँ कि उपर्युक्त जानकारी मेरे ज्ञान और विश्वास के अनुसार सही है। अगर इसमें किसी भी प्रकार की त्रुटि पायी जाती है तो इसके लिए मैं स्वयं ज़िम्मेवार रहूँगा/रहूँगी एवं इसके लिए मेरी पात्रता रद्द की जा सकती है।

आवेदन की तिथि : 02-Aug-2017
स्थान :

अभ्यर्थी का हस्ताक्षर

CUT HERE >>> CUT HERE >>> CUT HERE >>> CUT HERE >>> CUT HERE >>>

अभ्यर्थी की प्रति

अभ्यर्थी का नाम :- TEST	पिता/पति का नाम :- TESTQ
जाति : BC2	पद का नाम : Block Programme Officer
जन्म तिथि : 10-May-1995	पंजीयन संख्या : DRDA90000001

नोट: अभ्यर्थी इस प्रति को अपने साथ साक्षात्कार के समय अवश्य लाएँगे।

आवेदन की तिथि : 02-Aug-2017
स्थान :

अभ्यर्थी का हस्ताक्षर

Print