GOVERNMENT OF TELANGANA

NOTIFICATION NO.: 106/Plg./DMHO/MDK/2026

APPLICATION FORM

REGISTRATION NO: **(TO BE FILLED BY THE OFFICE)**	
POST FOR WHICH APPLICATION MADE:	
DISTRICT FOR WHICH APPLIED:	**MEDAK**

1	Name of the Candidate		PHOTO
2.a	Name of the Father		
2.b	Name of the Mother		
2.c	Name of Husband / Wife (if married)		
3	Sex		
4	Date of Birth		
5	Social Status (Please tick)	OC / EWS / BC A / BC B / BC C / BC D / BC E / SC (Grade) / ST	
6	Whether Physically Handicapped (Please tick)	YES / NO	
7	If yes please mention category (Please tick)	HH / OH / VH	
8	Whether Ex – Service (Man / Women)/NCC	YES / NO	

DETAILS OF SCHOOL EDUCATION:

CLASS	YEAR OF PASSING	DISTRICT IN WHICH STUDIES
IV		
V		
VI		
VII		
VIII		
IX		
X		

DISTRICT TO WHICH CANDIDATE BELONGS AS PER PRESIDENTIAL ORDER:

EDUCATIONAL QUALIFICATION:

QUALIFICATION	YEAR OF PASSING	NAME OF THE COLLEGE / UNIVERSITY

MARKS OBTAINED IN THE QUALIFYING EXAMINATION

TECHNICAL QUALIFIATION:

QUALIFYING EXAMINATION	1ST Year Marks	2nd Year Marks	3rd Year Marks	4th Year Marks

ADDRESS PARTICULARS:

NAME	:	
FATHER NAME	:	
HOUSE NO.	:	
STREET	:	
VILLAGE / TOWN	:	
DISTRICT	:	
PIN	:	
CONTACT NO.	:	
E-MAIL ID	:	

DECLARATION

I, Smt. / Kum. / Sri. _____, D/o, S/o. _____ certify that above particulars furnished by me are correct to the best of my knowledge. I also agree that in the event of any of the particulars furnished in my application being found to be incorrect or false at a later date my candidature will be cancelled summarily.

NAME AND SIGNATURE

OF THE CANDIDATE

ACKNOWLEDGEMENT

RECEIVED APPLICATION FROM _____ FOR THE POST OF _____

Application No.: _____

Dated: _____

NAME AND SIGNATURE