## **Verification Roll**

## For Appointment to the post of Sub-Inspector of Food

Passport size photograph to be attested

	alia ind	me in full (in block capitals) with ases, if any and Roll No. (Please icate if you have added or apped, at any stage, any part of	Surname	Name	
	γοι	ar name or surname).	Roli No.		
2.	1	e name of the post and the vice applied for			
3.	Pos Dis	sent address in full (i.e. Village, it Office, Police Station and trict or House number, ie/Street and Road, PIN Code)			
4.	(a)	Home address in full (i.e. Village, Post Office, Police Station and District or House number, Lane/Street and Road, PIN Code)			
	(b)	If originally a resident of Pakistan, Bangladesh, Nepal or any other country, the address in that Dominion of migration to Indian Union.			

5. Particulars of places where you have resided for more than one year during the preceding five years –

From	То	Residential address in full (i.e. Village, Post Office, Police Station and District or House number, Lane/Street and Road, PIN Code)

b. (a) Father's name in full with aliases, if any	: (	a	ı
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- (b) Present postal address (if dead, give last address): (b)
- (c) Permanent home address : (c)
- (d) Profession : (d)
- (e) If in service, give designation and official address : (e)

7. (i) Nationality of -

		(a)	Father			: (a	1)		
		(b)	Mother			: (k	<b>)</b>		
		(c)	Husband			: (c	)		
		(d)	Wife			: (c	l)		
8.	(a)	Exa	ct date of bi	rth		: (a	)		
		[To be supported by Birth Registration Certificat Admit Card of West Bengal Board of Secondary Education/any other recognized Board]							
	(b)	Pres	ent age			: (b	)		
	(c)	Age	of Matricula	tion/School Final		: (c	)		
9.	(a)	Plac	e of birth, dis	strict and State in	which it is	situated : (a	)		
	(b)	Dist	rict and State	to which you belo	ong	: (b	)		
10	).(a)	State	e your religio	n		:			
	(b) Are you a member of a scheduled caste/scheduled :  Tribes/OBC Answer "Yes" or "No" and if the answer Is "Yes" state the name thereof. [Copy of certificate to be attached]								
			c accountary						
11	. <b>.</b>			cation showing pla	ace of edu	ication with ye	ars in scho	ools and colleges. –	
	ame o	Edue of sch	cation qualifi	cation showing plants		ucation with ye		ools and colleges. –  Examination passed	
	ame o	Edue of sch	cation qualifi	y					
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	ame o	Edue of sch	cation qualifi	y					
	ame o	Edue of sch	cation qualifi	y					
	ame o	Educ of sch	cation qualifi	y					
	ame o	Educ of sch	cation qualifi nool/college address	y	ring	Date of le			
12 De	wit	of sch	cation qualifi nool/college address	Date of ente	ring	Date of le	aving	ress of the office, firm or on and reasons for leaving	
12 De	wit	of sch	cation qualification qualification qualification and the second s	Date of ente	ring oyed give	Date of le	Full addi	ress of the office, firm or on and reasons for leaving	
12 De	wit	of sch	cation qualification qualification qualification and the second s	Date of ente	ring oyed give	Date of le	Full addi	ress of the office, firm or on and reasons for leaving	
12 De	wit	of sch	cation qualification qualification qualification and the second s	Date of ente	ring oyed give	Date of le	Full addi	ress of the office, firm or on and reasons for leaving	

13.	Have you ever been conv any offence or charge-sho			
	in connection with any cr	iminal proceeding?		
	If so, the full particulars o	of the case should be		
	given.			
14.	Names of two responsible	e persons of your : (1)		
	locality or two referees to	whom you are known.		
		(2)		
belief Gover	I certify that the foregoin  I am not aware of any one  I mment. I understand that su	ng information is correct an circumstances which migh ubmission of false informati	t impair my fairness for	employment under
Date :		Signature of candidat	e :	
		- Sharare or canalage	5 ·	
Place :				
(Certifi	cate to be signed by a Gaze	etted Officer or Member of	Legislative or other auth	ority prescribed by
the app	oointing authority)			
	Certified that I have known	Sri/Smt		
Son/da	ughter of Sri			
			ioi the last	years
8	months and that to the b	est of my knowledge and b	elief the particulars furnish	ned by him/her
are corr				
		v 8	48	
Place :		Cianatura		
		Signature :		
Date : _		Designation or status a	ind address :	
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		K	eshosh	

Signature and designation of the Issuing Officer and the name of the office with full address and date. W.B.C.S. (Exc.)

Deputy Secretary

Food & Supplies Department
Government of West Bengal