

ASSAM PUBLIC SERVICE COMMISSION

PART-I

APPLICATION FORM FOR ASSAM LOCAL FUND AUDIT SERVICE

(PROMOTION) EXAMINATION

Paste here a	
copy of	
passport size	
photo	

Signature

1.	Name of candidate in full (in Block letters) with present address for communication	:-	
2.	Designation	:-	
3.	Date of continuous appointment as Asstt. Auditor of Local Audit Department.	:-	
4.	Name of the Office/Divn. in which serving at present.	:-	
5.	(i) The number of chance/chances if any availed previously.	:-	
	(ii) State the year in which appeared and the Roll No. allotted.		Year Roll No.
	(iii) Whether secured exemption marks	:-	Yes No No
	(iv) If yes, mention the name of subject(s), year and Roll No. of examination	:-	

Year	Roll No.	Subjects
		1.
		2.
		3.
		4.
		5.
		6.
		7.

					7.
6.	Subject/Subjects to be	e examined a	t present.	:-	1
					2
					3
					4
					5
					6
					7
					8

•	Mention the SC/ST(P)/ST(H). Please tick the approximately	caste you belong /OBC/MOBC/GEN. opropriate box.	to :	OB	
	NOTE: ATTACH SU (Except GEN)	PPORTING DOCUMENTS		ОВ	NOBC GEN
•	Details of fee		:	Adve ACC OTH PUB STA EXA ASSA	to be paid as per rate mentioned in the crtisement in the HEAD OF THE COUNTS, "NON TAX REVENUE IER NON TAX REVENUE 0051 LIC SERVICE COMMISSION 102 TE PUBLIC SERVICE COMISSION MINATION FEE RECEIPT OF AM PUBLIC SERVICE MMISSION."
	Name of the Treasury	No. and Date of Treasury Receipt	Va	lue	Reason of payment of half rate
	Office		Rs.	P.	Reason of payment of han rate
<u>te</u>	: Enclose Copy O	of The Original Treasury	7 Receip	. No Du	aplicate/Photocopies Will Be Accepted.
	: Enclose Copy O Enclosures :	of The Original Treasury	/ Receip	. No Du	iplicate/Photocopies Will Be Accepted.
	Enclosures:	of passport size photos			aplicate/Photocopies Will Be Accepted. Yes/No
	Enclosures: (i) Two copies of pasted and the copies of th	of passport size photos	(one	-	
te	Enclosures: (i) Two copies of pasted and the of appointment issued.	of passport size photos other pinned) containing the date of sued by the appointing	(one :	-	
	Enclosures: (i) Two copies of pasted and the compasted and the composite appointment is authority.	of passport size photos other pinned) containing the date of sued by the appointing	(one :	-	Yes/No Yes/No

I hereby declare that all the Statements made in this application are true and complete to the best of my Knowledge and belief. I understand that action can be taken against me by the Commission if I am declared by them to be guilty of any type of misconduct mentioned herein.

I am applying for the post through Proper Channel.

onduct mentioned herein.	
el.	
Signature of app	licant (in full)
Date:	
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PART-III

RECOMMENDATION OF APPOINTING AUTHORITY

I, Sri/Smt. (Designation)
do hereby forward the application of Sri/Smt.
(Designation) for appearing in the Assam Local Fund
Audit Service (Promotion) Examination to be conducted by Assam Public Service Commission on
being satisfied that he/she fulfils all the requirements for being eligible to apply.
Date: Signature of the appointing officer
(Seal)
