

অসম লোকসেৱা আয়োগ ASSAM PUBLIC SERVICE COMMISSION

APPLICATION FORM

FOR HALF YEARLY DEPARTMENTAL EXAMINATION, 2018

From :	:- SI	hri
To :	A	he Secretary, ssam Public Service Commission, waharnagar, Khanapara, Guwahati-22.
_		he Secretary to the Govt. or Assam. ersonnel (A) Deptt., Dispur. Guwahati -6 OR
	T	he Deputy Commissioner/Sub-Divisional Officer (Civil).
		OR leads of the Local Office (as the case may be)
	••	Dated :
a:		
Sir. W	With	reference to the rules for the conduct of Half Yearly Departmental Examination. I have
		report my intension to appear at the HYD Examination to be held from
		on the following subject(s).
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Nearest Centre		
		Yours faithfully,
TO BE C	CLE.	ARLY WRITTEN:
Name in	full	(in Block Letters)
Designat	tion .	
Place of 1	pres	ent posting
District ·		
		to their respective Administrative heads of the Department in case of officers belonging IAS and ACS Cadres)
