

**APPLICATION FORM FOR PO / RMS ACCOUNTANT EXAMINATION
FOR THE YEAR _____
(TO BE FILLED IN BY THE CANDIDATE)**

-
1. Full name of the Candidate :
 2. Present Appointment held (Mention PA/SA) :
 3. Office to which attached (in case working on deputation the present and parent designation should be mentioned) :
 4. Community (Mention whether SC/ST with sub-caste):
 5. Date of entry in Govt. Service :
 6. Date from which continuously working in Postal Asst. / Sorting Asst. cadre. :
 7. Whether declared Pmt/Q.P./Temp (If so the date of Pmt./QP/Temp may be furnished) :
 8. Length of service in PA/SA cadre as on the last date fixed for the receipt of the application. :
 9. No. of chance(s) already availed by you with Roll No. and year of Examination. :
 10. State if you have applied for withdrawal of application in any examination year (If so particulars of Roll No. and year of examination should be furnished). :
 11. State if permission was granted in any examination year for withdrawal of application (if so particulars of CO letter granting withdrawal of application may be furnished along with Roll No. and year of examination). :
 12. State whether this is the 1st / 2nd / 3rd chance. :
 13. Serial number in the circle gradation list of PA/SA as the case may be. :
 14. Centre at which you desire to appear the examination:
 15. Whether desire to answer in Hindi or English. :

I Sri/Smt/Kumari _____ do hereby declare that the particulars furnished by me in this application form are all true.

Station :

Date :

Signature of the Candidate

To be filled in by the Head of Office or the controlling officer concerned

- (1) Has the candidate possess a good record of service :
for the preceeding 3 years a good records of Service ?
- (2) Have you verified the correctness of the entries :
made against items No.1 to 13 above ?
- (3) Is the candidate appearing for the 1st / 2nd / 3rd time :
- (4) Specific recommendation or otherwise on the following forms:

Certified that the particulars furnished by Sri/Smt/Kumari _____
_____ have been checked and verified with reference
to the relevant records and found those all correct. The official is eligible /not eligible to take up
the Po/RMS accountant Examination to held on _____ and as such
he is recommended/ not recommended for the same (Strike out which is not applicable)

Signature of Head of Office
with Designation and Seal

NB: In case any application is not recommended, the reason for the same may be stated.