## FORM OF APPLICATION FOR THE POST OF COUNSELLOR

1.	Name (in Block letters)	:		Affix a Photo
	Father's/Spouse's Name	:		
3.	Age	:		
4.	Date of Birth	:		
5.	Gender	:		
6.	Address for communication (with pin code)	,		

7. Contact Number8. E-Mail Address9. Educational Qualification

Name of Exam	Year of passing	Board/University	Percentage of marks	Remarks if any

10. Computer Knowledge :11. Work Experience :12 Other Qualifications :

I hereby declare that all the above details are true to the best of my belief and knowledge.

Place:	Signature
Date:	