	Model appli	cat	ion format
1.	Personal Information		
1.1	Name	:	
1.2	Age (as on 1.8.2021) (attach date of birth certificate)	:	
3.	Address for correspondence	:	
4.	Permanent Address (attach proof of residence)	•	
5.	Are you medically (physically & mentally) fit to conduct field visits? (attach a medical fitness certificate)	:	
6.	Whether member of Political party? (attach a personal affidavit certified by a notary public)	:	
7.	Whether convicted / charge sheeted in a criminal case? (attach a personal declaration certified by a notary public)	:	
8.	Do you have responsibility of implementing MGNREGA in any capacity?	:	
2.	Professional information.		
2.1	Highest education qualification (attach copy of certificates attested by a gazetted officer)	:	
2.2	Total no. of years of work experience (attach copy of certificates attested by a gazetted officer)	1	
2.3	Field of experience	:	
2.4	Last post / position held, if any	:	
2.5	Member of any society / professional body, if any (give details)		

2.6.	Date of retirement (in case of Government Servant)						
2.7.	Post held retirement	at t	the	time	of	:	

Declaration:

It is certified that above information furnished by me are correct. I have gone through the advertisement and the Instructions on Ombudsman" issued by the Govt. of India and Government of Tamil Nadu and understand that this is a part time work and all functions are to be carried out within the purview and confines of the MGNREGS Act, Rules and Schemes framed there under and operational guidelines /Annual Master Circular issued by Govt. of India from time to time.

Date:			

Place:

Signature of the applicant: Name of the applicant: