

nappar morrows or recumed as Established was Samantapuri, Shubaneswar-751 013 Form for issue of Identity card

Photo (3×3 cms with 75% area covered with image of the face) front attested by sponsoring Authority to be pasted

| Photo (3)(3) cmc with 75(5) area covered with image of |
|---|
| area covered with image or |
| the face) to be pasted here |
| (flot to be attested) |
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| |
| |
| |
| |

(Signature of the Applicant in the box above)

Part-1
Fo be filled by Applicant)

| | (To be filled by Applicant) | | | | | | |
|-------|---|--|--|--|--|--|--|
| Sl.No | Type of Identity Card | Category of Employee | | | | | |
| 01 | Put tick (V) mark | Regular/Casual/Contract/Out sourced Employee | | | | | |
| 02 | Name of the Applicant | | | | | | |
| | (IN CAPITAL LETTERS) | | | | | | |
| 03 | Designation (School & Section) | | | | | | |
| 04 | Blood Group | | | | | | |
| 05 | Address of the Place of working | | | | | | |
| 06 | Date of Birth | | | | | | |
| 07 | Telephone Numbers | Office:- | | | | | |
| | | Mob:- | | | | | |
| | | Res:- | | | | | |
| 08 | Father's/Husband's Name | | | | | | |
| 09 | Date of Superannuation/Joining | | | | | | |
| 10 | Mark of Identification | | | | | | |
| 11 | Reasons for Issue(Put tick (V) mark) | | | | | | |
| | 1) Renewal | 2) Loss/Mutilation | | | | | |
| | 3) Change in designation | 4) Fresh appointment | | | | | |
| | 5) Transfer | 6) Any other(specify) | | | | | |
| | 7) | 8) | | | | | |
| | 9) | 10) | | | | | |
| 1. (| Certified that the aforesaid information is o | orrect. | | | | | |

| | 9) | 10) | |
|----|------------------------------------|---------------------------------|-------------------------------|
| 1. | Certified that the aforesaid infor | rmation is correct. | |
| 2. | The old Identity card No | dated | is hereby enclosed or the old |
| | Identity Card is lost and the matt | dated | |
| | | lete whichever is inapplicable) | |
| | | Signature of the Applicant | |
| | | | |
| | | n: | ate: |

The information furnished by the applicant has been verified to be correct.

| TYPE | Coverage of Building | PERIOD |
|------|--|-------------------|
| i | Period of Validity | 5/1 Year/6 months |
| ii | Reason (Fresh/Renewal/Loss/Change in Designation | |

| | Assistant Registrar (A&E) |
|--|--|
| | |
| | ndradesamphophadrasampunesamuskiskald (IMMERCA) is SAITMARCA |

APPROVED

Signature:

Registrar