Application Format

Passport Size Photo to be signed by the candidate

To,
Project Director,
Maharashtra State AIDS Control Society,
Wadala (W), Mumbai – 31.

| 1. | Application for the Post | : | | | | |
|----|---------------------------|----------|-----------------|------------|--------|---------|
| 2. | Candidates Name | : | | | | |
| | | | Surname | First Name | Midd | le Name |
| 3. | Date of Birth | : | | | | |
| | | Age a | s on | Years | Months | Days |
| 4. | Correspondence Address: | | | | | |
| | | | | | | |
| | _ | | | | | |
| 5. | Permanent Address | : | | | | |
| _ | E 1110 | | | | | |
| 6. | E-mail ID | <u>:</u> | | | | |
| 7. | Tel. No./Mobile No. | : | | | | |
| 8. | Working knowledge of comp | outer (N | MS Office etc.) | : | Yes | No |
| | | | | | | |

9. Educational Qualification:-

| Sr. | Educational | Name | of | the | University / | Percentage | Grade |
|-----|---------------|-------|----|-----|--------------|------------|-------|
| No. | Qualification | Board | | | | | |
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10. Experience Details:-

| Sr. No. | Name of the office worked before | Designation | Period | Nature of work |
|------------|----------------------------------|-------------|--------|----------------|
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11. Any Other Special Qualification:-

Date: / / 2025

Candidates Name & Signature