

**GOVERNMENT OF MANIPUR  
DIRECTORATE OF TRANSPORT**

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Common Application Form for the post(s) of : **ASI (Taxes)/ASI (Enf.)**

- All details to be filled in carefully
- All fields are mandatory
- Candidates are to submit the Application Form along with a fee (Non-Refundable) of Rs. 500/- for General/OBC, Rs. 300/- for SC / ST in cash and free for PWDs.

1. Full Name (in block letters) : .....
- .....
2. Father's / Husband's Name : .....
- .....
3. Date of Birth : .....
4. Age (as on 26<sup>th</sup> Feb, 2020) : .....
5. Gender : .....
6. Permanent Home Address : .....
- & District .....
7. Present Address : .....
- .....
8. Telephone / Mobile No. : .....
9. Nationality : .....
10. Whether Un-reserved/ ST / SC / OBC  
(Please tick in the relevant box below and enclose copy of Self attested Certificate)  
 Un-reserved    ST    SC    OBC(Meitei)    OBC (Meitei Pangal)
11. Whether PWD (Persons with Disabilities)  
(Please tick in the relevant box below and enclose copy of Self attested Certificate)  
 Locomotion disability    Hearing Impaired   |
12. Whether a Government employee :         Yes         No



If "Yes" , "No Objection Certificate" issued by the employer (Competent Authority) should be enclosed.  
(Please tick in the above relevant box and enclose copy of Self attested Certificate)

**13. Educational Qualification:**

| Sl.No. | Name of Exam | Year of passing the Exam | Division & Percentage | Name of School/College/University/Institute |
|--------|--------------|--------------------------|-----------------------|---|
|        |              |                          |                       |   |
|        |              |                          |                       |   |
|        |              |                          |                       |   |
|        |              |                          |                       |   |
|        |              |                          |                       |   |

14. Indicate your order of preference against service/post given below for which you would like to be considered for appointment (Please write your first preference as [01] and second as [02] and so on)

| Name of Post   | Pay Scale                | Order of Preference |
|----------------|--------------------------|---------------------|
| 1. ASI (Taxes) | Rs. 5200-20200 + GP 1900 |                     |
| 2. ASI (Enf.)  | Rs. 5200-20200 + GP 1900 |                     |

15. Documents to be enclosed  
(as Self-attested Xerox copies)

| Sl. No. | Details of documents  | Tick, if enclosed |
|---------|---|-------------------|
| 1       | Class –X Certificate/Class VIII Passed Certificate (for drivers only)                 |                   |
| 2       | Class – XII Certificate   |                   |
| 3       | Degree Certificate and other Higher Qualification                                     |                   |
| 4       | Type passed Certificate /Computer Course Certificate(CCC) /Shorthand Certificate etc. |                   |
| 5       | Technical qualification Certificate ( <i>for Technical posts</i> )                    |                   |
| 6       | ST / SC / OBC Certificate   |                   |
| 7       | PWD (Persons With Disabilities) Certificates ( <i>if applicable</i> )                 |                   |
| 8       | No Objection Certificate ( <i>if applicable</i> )                                     |                   |
| 9       | Employment Exchange registration number   |                   |
| 10      | Employment Exchange sponsoring serial number  |                   |
| 11      | Driving license valid for the last 5 yrs. ( <i>for Driver</i> )                       |                   |
| 12      | Others, if any.   |                   |

### DECLARATION

I (Name) ..... s/o, d/o,  
w/o (Father's/Mother's/Husband's name) ..... of  
(Address)..... hereby  
declare that the above information / details furnished are true and correct to the best of my knowledge  
and belief. In the event of any information being found false / incorrect, my candidature is liable to be  
cancelled without any notice.

Date .....

Signature of applicant in full

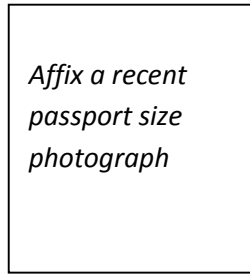
Place .....

GOVERNMENT OF MANIPUR  
DIRECTORATE OF TRANSPORT

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**ADMIT CARD**

(for Office)



Roll No. :

(To be filled by Official)

Name of the Candidate (in Block Letter) : .....

Father's/Mother's / Husband Name : .....

Full address : .....

Name of Post applied for : .....

Whether General/SC/ST/OBC(Meitei): .....  
/OBC (Meitei Pangal) / PWD  
(Persons with Disabilities)

Employment Exchange Sr. No. & date : .....

Mobile No. : .....

(Signature of the candidate)

(Signature of the issuing Authority)

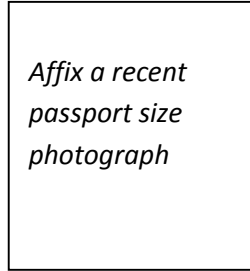
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GOVERNMENT OF MANIPUR  
DIRECTORATE OF TRANSPORT

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**ADMIT CARD**

(for Candidate)



Roll No. :

(To be filled by Official)

Name of the Candidate (in Block Letter) : .....

Father's/Mother's / Husband Name : .....

Full address : .....

Name of Post applied for : .....

Whether General/SC/ST/OBC(Meitei): .....  
/OBC (Meitei Pangal) / PWD  
(Persons with Disabilities)

Employment Exchange Sr. No. & date : .....

Mobile No. : .....

(Signature of the candidate)

(Signature of the issuing Authority)