

**GOVERNMENT OF MANIPUR
TOWN PLANNING DEPARTMENT**

**APPLICATION FORM FOR RECRUITMENT OF 5 (FIVE) POSTS OF ASSISTANT TOWN
PLANNER & 5 (FIVE) POSTS OF ASSISTANT ARCHITECT.**

(Read instructions carefully before filling up the form)

*Affix a recent
passport size
photograph
(To be self-
Attested)*

Post Applied For:

1. Name of the applicant (in CAPITAL letters) :

.....

2. Father's/Husband's name:

3. Sex (Male/Female):

4. Date of Birth (DD/MM/YYYY):

(As in Matriculation Certificate)

5. Age as on 1st January, 2024: YearsMonths Days

6. Present address:

.....

7. Permanent Address:

.....

8. Email & Mobile No.:

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9. Whether Un-reserved/ST/OBC-Meitei.:

Please enclose copy of self-attested certificate (if applicable)

10. Whether a government employee or not: YES/ NO:

If "Yes", a "No Objection Certificate" **in original** issued by the employer (Competent authority) should be enclosed.

11. Documents enclosed:

No.	Details of documents enclosed	Tick if Enclosed
1	Class-X certificate	
2	Class XII certificate	
3	Degree Certificate/ Graduate Certificate.	
4	Post Graduate Degree/ Diploma Certificate	
5	Work Experience Certificate (if Applicable)	
6	Valid Council of Architecture Registration Certificate (if Applicable)	
7	Permanent Residential/ Domicile Certificate	
8	ST/ OBC (Meitei)/ PwBD Certificate (if applicable)	
9	No Objection Certificate (if applicable)	
10	Proof of Application Fee Payment (Transaction Receipt)	
11	Others (Resume/ Portfolio)	

Note:

- (i) *The application along with all the relevant documents is to be submitted to the e-mail address: tpmanipur@yahoo.com in a single PDF file.*
- (ii) *All the Original Documents are to be produced during the time of the Interview.*

DECLARATION

I,..... Son/ Daughter of
 Shri/Smt.....aged.....
 (D.O.B.....) Resident of
 District..... ,

Manipur hereby declare that the information given above and in the enclosed documents are true to the best of my knowledge and belief and nothing has been concealed therein. I am aware of the fact that if the information given by me is proved false/not true, I will have to face the criminal proceedings as per provision of section 177,193,197,198,199 and 200 of Indian Penal code and any other suitable provisions of the Law. Also, all the benefits availed by me shall be summarily withdrawn and my application shall be liable for disqualification.

Date:

Place:

Signature of the Applicant