## PUBLIC SERVICE COMMISSION, WEST BENGAL

## APPLICATION FORMAT

# <u>APPLICATION FOR WEST BENGAL JUDICIAL SERVICE EXAMINATION, 2014</u>

### ADVERTISEMENT NO. 04/2014

( CLOSING DATE FOR RECEIPT OF APPLICATION : The 31st March, 2014 )

#### **CAUTION**

- (i) A candidate must consult the "Information to Candidates" for the examination, use the prescribed application format and fill in the application form correctly against all the items in his/her own handwriting with ball point pen of black/blue ink and furnish required particulars/documents.
- (ii) Correction/overwriting, if any, should be accompanied by signature of the candidate.

ATTESTED PHOTOCOPY OF THE CERTIFICATE)

- (iii) In case the application is not filled in accordance with the above instructions or any of the required documents is not enclosed, it will be treated as incomplete/defective and summarily rejected.
- (iv) If any item(s) of the application is considered inapplicable to the candidate he/she should write 'NOT APPLICABLE or (N.A.)' against the particular item(s) and in any case no item of the application should remain unfilled.

Note: Keeping the application form in front, the required documents are to be stitched with the application securely with a durable thread in the following sequence – (1) I.P.O. or Treasury Challan, in original (not required for SC/ST candidates of W.B. and Persons with Disability), (2) Self-attested photocopies of (i) Madhyamik or equivalent qualification certificate, (ii) Law Degree certificate (iii) Certificate of enrolment in the roll of Bar Council, (iv) SC/ST/BC/PH (if applicable), (v) Citizenship Certificate (for candidates acquiring citizenship by registration) and (3) Two unstamped Self-addressed envelopes.

						_		
		(Space for office use )					Space for pas	
		Roll No.					passport size signed in fu	ıll by the
1.	Nam	e of the Candidate	:		(IN	CAPITAL	LETTERS)	
2.	(a)	I.P.O./Treasury Challan attached for	:	Rs		_		
	(b)	I.P.O. No(s). and value	:					
	(c)	Date of purchase and name of issuing post office with address	:					
	(d)	No. and amount of receipted Treasury Challan attached	:					
3.	Choid	ce of Preliminary Examination Centre (Kolkata or Darjeeling)	:		Cent	re Name	9	
4.	[ S B	Community / Category Put '✓' mark in appropriate box. C/ST/BC candidates not belonging to the State of West lengal should indicate their community as 'General'] F SC/ST/BC, ATTACH SELF-CERTIFIED OR	:	Gen	sc	ST	BC Category–A	BC Category–B

	1	from competent authority of West Bengal :  [ Put ' ✓ ' mark in appropriate box(s) ]	•	Yes NO	
	(c)	If SC/ST/BC candidate, mention	:	Sub-Caste	State
5.	(	Whether you are a person with disability (Write 'Yes' or 'No' in the box) (IF YES ATTACH SELF-CERTIFIED OR ATTESTED PHOTOCOPY OF CERTIFICATE)	:	Issuing A	uthority
		(i) In case you are a person with disability (PWD), state	the Cat	regory (Put '√' mark in the app	ropriate box) :
	( )	Low Vision Hearing Impaire		Orthopaedically F	
	(	<ul><li>(ii) In case you are a person with low vision, mention if y (Put '√' mark in appropriate box)</li></ul>	ou requ	iire the help of a Scribe :	Yes No
6.	Sex	(Put '✓' mark in appropriate box)	:	Male	Female
7.		Date of Birth (as recorded in Madhyamik or equivalent examination Certificate / Admit Card)	:	D D M M	Y E A R
	(b)	Do you claim relaxation of age as SC/ST/BC of West Bengal or as Person with Disability [Write 'Yes' or 'No']	:		
	(c)	Do you claim relaxation of age limit for being a Government Servant? (Write 'Yes' or 'No') [ If yes, attach original certificate from the appointing authority ]	:		
8.	(a)	Whether a citizen of India (Write 'Yes' or 'No')	:		
	(b)	State, whether a natural citizen or a citizen by registration (If by registration, attach self-attested photocopy of certificate)	:		
9.	Fath	ner's Name (IN CAPITAL LETTERS)	:		
10.	(	Complete address for communication IN CAPITAL LETTERS) mentioning locality, Post office, Sub-Divn., Dist. and Pin-Code:	:		
	(b)	Permanent Address	:		
11.		Do you have the ability to read, write and speak in Bengali (Write 'Yes' or 'No')	:		
		Whether you are a Nepali Speaking person (Write 'Yes' or 'No')	:		

(d) State your  (e) State your of Final Ex	amination (Put a 'v' n	Compulsory Paper - II nark in appropriate box and onwards) cates must be attached	:	ngali	Hindi	Urdu	Nepali
(e) State your of Final Ex  2. Academic Qual [ Self-attested	choice of language in amination (Put a '√' n ifications (Madhyamikohotocopy of all certification Year of	and onwards) cates must be attached Name of	: Be		Hindi	Urdu	Nepali
of Final Ex  2. Academic Qual [ Self-attested    Name of Examin	amination (Put a 'v' n ifications (Madhyamik ohotocopy of all certification Year of	and onwards) cates must be attached Name of	:		Hindi	Urdu	Nepali
[ Self-attested   Name of Examina	photocopy of all certification Year of	cates must be attached	: d to the applic				
				ation j.			
		Board/Council/Ur	niversity	Subjects <sup>-</sup>	Γaken	Division/ Class/Grade	Remarks
(Write 'Yes' or [ If yes, attach :  1. (a) Were you d from applying t	self-attested photocope barred previously by brough this Commissi der Government? (W	y of certificate ] the Commission on for	: [	Exami	nation	Roll No.	Debarred upto (Dat
(b) ii yes, give	acturis .		. <u>rear</u>	Exam	<u>nation</u>	<u>rtoii 110.</u>	<u>Besamed apto (Bat</u>
<ul><li>(a) Are you prese</li><li>(b) If yes, give de</li></ul>		ee ? (Write 'Yes' or 'No'	') :				
(1) Name of the Post	(2) Temporary/Perma		(4) Office wh employ		(5) Date of oining	(6) Date of leaving, if any	(7) Cause of leaving

(c) i) Whether you are a person from the three Hill sub-

	(b) If yes, specify	years of examination and roll numbers	:	Year of Examination	Roll No			
17.	State below the three optional papers (from the list			: OPTIONAL PAPERS				
	intend to appear -	me and Syllabus') in which you - (No addition or alteration in the	(1)					
	choice of optional papers thus indicated will be allowed at any stage after submission of the application)							
			(3)					
			(0)					
18.	The list of docume	ents enclosed:						
	SI.	Particulars	SI.	Partic	ulars			
	No.	T di dodiai 5	No.	- Turio	uiai 3			
	i.		vi.					
	ii.		vii.					
	iv.		viii.					
	V.		ix.					
			^.					
		DECLA	RATIO	N				
	L colemnly declar	re that (a) all statements made in this app	dication are	a true complete and correct	to the best of my knowledg			
and h	•	ent of any information being found false n		•	-			
		iced on demand, (c) I agree to take this ex	•					
	•			•				
		sequently the Commission finds me ineligib			•			
		inalization of the results. (d) I have submit						
неаа	of my Office/Depa	rtment in writing that I am applying for this	examination	on ( *Strike out it not applicab	ie).			
Place	:							
Date	:			(Full signature of the o				
				(Full name to be writte [ Not in capital let				