## **DECLARATION**

## Form- "A"

## [See rule 5 (1)]

hri/	Smti		Aged	years,	resident
		••••••			s follows:
	I have filled my applications of the state of the I have filled my applications.	cation for the post of			
I have	ave (number) living children as on today. Their names, sex and date of birth are:				
	and the second s	Name	Sex	Date	of Birth
		•	5		
<b> </b>					
L					
to the I also	am aware that if I have more than two living children, I am liable to be disqualified for the appointment the post.  also declare that:  I am not married / I am married and my spouse and I have not violated the provision of legal age of marriage.  am aware that marrying in violation of the provision of the Prohibition of Child Marriage Act, 200 act No. 6 of 2007) shall be disqualification for appointment to the post applied for.				
Pla	ace:	······			
Da	ate:	***************************************			
				***************************************	
				Signature of the	