

ARUNACHAL PRADESH PUBLIC SERVICE COMMISSION

APPLICATION FORM FOR ADMISSION TO THE WRITTEN EXAMINATION FOR THE POST OF SECTION OFFICER (SO) THROUGH LIMITED DEPARTMENTAL COMPETITIVE EXAMINATION 2025

Candidates should carefully read the advertisement issued before filling up the

Important Instructions

application form.

2.	Paste Self-attested photograph firmly with gum in space provided. Do not pin or staple the photograph.									Photograph here											
1. N	AME (OF AI	PPLI	CAN	T (G	live o	one b	ox g	ap be	etwe	en Fi	rst/M	iddle	e/Sur	name	e)					
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5. E-	MAIL	ID: _																			

6. UNIQUE ID NO. (AADHAR NUMBER): _____

7. DATE OF BI	RTH	Day	Month		Yea	ır			
8. EDUCATION	NAL QUA	ALIFICATIO	ON:						
Name of Examination passed	Examination		Year of Passing	Board/ University			CGPA/ Percentage	CGPA/ Percentage of marks	Division/ Class
Class X									
Class XII / Diploma									
Graduation									
Post Graduation									
10. CATEGORY 11.WHETHER SECRETARI 12. DATE OF A 13. LENGTH O	SERVING	G ON REG	FULAR SER ASO:	VICE A				CHAL PRAD	ESH CIVIL
14. PRESENT P					_		<i>,</i>		
15. APPLICATI	ON FEE:	: (enclose Ti							
Date :									
16. Have you ev		ebarred by U	UPSC/APPS	C or an	y State	PSC:	Yes] No [
b. Period of d	lebarment	t	:						

Year

7. DATE OF BIRTH

Documents to be submitted along with the Application Form

1. Latest/Recent color passport size photo. The photograph is to be in white background, front faced and without headgear and sunglasses.

- 2. Self-Attested photocopy of Degree certificates and Mark Sheets issued by the Assistant Registrar/Registrar/Controller of Examination/Vice-Chancellor of the concerned University to ascertain degree.
- 3. Self-Attested photocopy of Matriculation Certificate for proof of age issued by the Board only will be accepted.
- 4. Self-Attested Photocopy of APST certificate and copy of PRC/Aaadhar Card in case of General candidates.
- 5. Self- Attested photocopy of appointment order to the post.
- 6. Treasury challan of amount deposited as fee.

Declaration

I hereby declare that I have read the detailed information/advertisement before submission of this application. I hereby certify that all statements made and information given by me in this application form are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect before or after the interview/appointment, action can be taken against me by the Commission and my candidature/appointment shall automatically be cancelled /terminated.

Plac	
Date	
	Signature of candidate
	TO BE CERTIFIED BY CADRE CONTROLLING AUTHORITY
1)	Certified that Mr/Ms (Name) is employed as (Designation). He/She is posted in the office of
-	That, his/her date of appointment to the post is and he/she hat ompleted years of regular service in the grade.
3)	That, he/she has obtained Very Good Grade in the APAR of the past 5 consecutive years as annexed in annexure-I.
	There is no objection to his/her admission to the examination being conducted by APPSC, Itanagar or recruitment to the post of through LDCE dvertised vide no. APPSC-12/37/2024 dated 29 th September, 2025.
Plac	Signature:
Date	Name:
	Designation:

TO BE FILLED BY THE CADRE CONTROLLING AUTHORITY

APAR grading of last 5 (Five) consecutive years:

Sl. No.	Name	Educational Qualification	Date of appointment as ASO	Qualifying length of service	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	Remarks

Place:	Signature:
Date:	Name:
	Designation:

Note: Duly filled up APAR by the cadre controlling authority must be forwarded to the Commission along with the Application Forms and documents submitted by the applicants. The cadre controlling authority shall nominate only such candidates with at least 5 (five) "Very Good" consecutive APAR grading of the last 5 years and possessing minimum educational qualification of graduate/bachelor degree from a recognized university.