<u>Application for Certificate- Revenue Officers</u>

Name (in Block Letters)	1	Photo
 Official Designation and address as on Admission records in surve 	ev Training :	
. Address to which the certificate i	s to be sent :	
4. Name of Examination for which is required (Chain Survey or Highe		
5. Centre and Date of Examination	passed :	
5. Register No	:	
. Period of training & Centre	:	
Details of Challan Receipt enclos (No. date amount and Name	ed :	
of Treasury)		
. Signature with date		