APPLICATION FORM DEPARTMENT OF CHILDREN WELFARE AND SPECIAL SERVICES – District Child Protection Unit (Chennai South) Application form for the post of Social Worker (Priority will be provided to Chennai residents) Name of the Applicant * (IN CAPITAL LETTERS) Name of the Father / Spouse* 2 Date of Birth * 3 4 Gender Age as on 01.04.2025* 5 Marital Status 6 Address for Communication * (IN CAPITAL LETTERS) 8 Phone/Mobile Number* 9 E-mail ID* Educational Qualification (Enclose the copy of 10 supporting documents) * Additional Qualification (if any) 11 12 For Differently abled person (if applicable) 1) Type of Disability 2) % of Disability 3) Enrolled ID number provided by the Government. 13 Details of Working Experience (Enclose the copy of the relevant experience certificates) * (along with the NOC of the previous organisation) S.No Name of the Designation Years of experience Organization. No. of years From То (Date) (Date) & months 14 Proficiency in Computer * *Mandatory $Note:\ In complete application\ and\ application\ without\ relevant\ supporting\ documents\ will\ be\ summarily\ rejected\ without\ any\ prior\ information.$ hereby declare that the particulars furnished by me in this application form are true to the best of my knowledge and belief. In case any information is found to be incorrect, my candidature shall liable to be rejected.

Signature of the Applicant Date: