APPLICATION FOR SPO

FULL NAME

PHOTO

NIC NUMBER

NIC COPY ATTACHED ☐

ADDRESS RESIDENCE

OFFICE

DISTRICT

GENDER MALE ☐ FEMALE ☐

DATE OF BIRTH D D M M Y Y Y Y

CONTACT NUMBER

RESIDENCE

MOBILE

TYPE OF SPO : FULL TIME ☐

PART TIME ☐

E-MAIL

TYPES OF COMMITMENTS AND SERVICES THAT CAN BE OFFERED

CANVASSING INDIVIDUAL FARMERS ☐

CONDUCTING AWARENESS PROGRAMMES ☐

PROVIDING INSTALLATION SERVICE ☐

BANKING DETAILS

BANK

BRANCH

A/C No.

SPECIAL POINTS TO BE NOTED:

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.....

PROPOSED SPO'S SIGNATURE

.....

RECOMMENDING OFFICER'S SIGNATURE

DATE: D D M M Y Y Y Y

NOTE: *Please attach the following documents with the application:*

Copy of NIC ☐ *Stamp Siza Photo* ☐ *Banking Details* ☐ *Recommendation Note* ☐

for office use only

DISTRICT:

NO. OF PROMOTERS AT PRESENT

OBJECTIVES:

AUTHORIZED BY: .....

SPO NUMBER