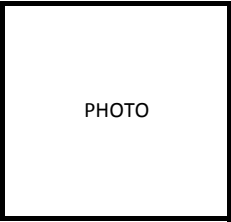


# APPLICATION FOR SPO

FULL NAME



NIC NUMBER 



 NIC COPY ATTACHED

ADDRESS 



 RESIDENCE

OFFICE

DISTRICT

GENDER MALE  FEMALE  DATE OF BIRTH

CONTACT NUMBER RESIDENCE 



 TYPE OF SPO : FULL TIME

MOBILE 



 PART TIME

E-MAIL

**TYPES OF COMMITMENTS AND SERVICES THAT CAN BE OFFERED**

CANVESSING INDIVIDUAL FARMERS

CONDUCTING AWARENESS PROGRAMMES

PROVIDING INSTALLATION SERVICE

**BANKING DETAILS**

BANK

BRANCH

A/C No.

SPECIAL POINTS TO BE NOTED:

.....

.....

.....

.....

PROPOSED SPO'S SIGNATURE RECOMMENDING OFFICER'S SIGNATURE

DATE:

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 PRESENTS

OBJECTIVES:

AUTHORIZED BY: ..... SPO NUMBER