[FORM 19 [See rule 31]

Claim for inclusion of name in the electoral roll for a teachers' constituency

PHOTO of the applicant To The Electoral Registration Officer,(Teachers') Constituency. Sir, I request that my name be registered in the electoral roll for the......(teachers') Constituency. The particulars are:— Father's/Mother's/Husband's name (in full)..... House address (Place of ordinary residence):— House No..... Street/Mohalla..... Town/Village..... Post Office..... Police Station/Tehsil/Taluka/Mouza District Age Disability (if any) Speech & hearing disability Locomotor disability Visual impairment (Tick appropriate box) (Optional Field) Whether registered as an elector for any assembly constituency. If yes, then mention the following---(a) Number and name of the assembly constituency..... (b) Part/polling station No.(if known)..... (c) Date of birth..... (d) EPIC number (if any)..... Contact number-(i) Mobile..... (ii) Landline..... Email id (if any) 2. During the last six years I have been engaged in teaching for a total period of more than three years as follows:--Name of Educational Institution From (Date) To (Date) Period 1 2. 3. 4. In support of the above I submit herewith.....

| 3. *My name has not been included in the electoral roll for this or any other teach | ners' constituency. |
|---|--|
| *My name has been included in the electoral roll for theteachers' cor and I request that it be deleted from that roll:— | |
| | |
| 4. I declare that I am a citizen of India and that all the particulars given abobelief. Place Date | |
| NOTE:-Any person who makes a statement or declaration which is false and which does not believe to be true is punishable under section 31 of the Representation *Strike out the paragraph not applicable. | |
| (Perforation) | |
| Intimation of action taken | |
| The application in Form 19 of Shri/Shrimati/Kumariaddress | |
| has been— | |
| (a) accepted and the name of Shri/Shrimati/Kumari in Part No | |
| (b) rejected for the reason | |
| Date | Electoral Registration Officer (Address) |
| (Perforation) | |
| Receipt for application | |
| Received the application in Form 19 from Shri/Shrimati/ Kumari*address* | |
| | |
| Date | Electoral Registration Officer (Address) |
| *To be filled in by the applicant. | ` |