



WEST BENGAL PRIVATE TUTOR'S WELFARE ASSOCIATION

REGD. NO. : SO200787

Shibsankar Seba Samiti North, Baburbag, P.O.- Rajbati,
Dist.- Purba Bardhaman, Pin - 713104

Email ID : wbptwaofficial2001@gmail.com

Colour
Passport
Size
Photo

FILL IN CAPITAL LETTER

1. Private Tutor's Name :
2. Father's Name :
3. Permanent Address :
4. Coaching Centre :
5. Name of WBPTWA's District :
6. Block :
7. Unit :
8. D.O.B. :
9. Educational Qualification :
10. Aadhaar Card No. :
11. E-SHRAM Card : (Universal Account Number)
12. Group / Subject :
13. Mob. / Whatsapp No. :
14. Email Address :
15. Blood Group :
16. Teaching Experience : Years.

DECLARATION

I..... Do hereby swear or affirm and declare that I am not engaged in any full-time or part time job of Central or State Government or Govt. Aided. Dept. I admit that I am not engaged in school as a para teacher or in college or University as a part-time or guest lecturer. I also confirm that the above -mentioned information is true and correct to the best of my knowledge and belief. I understand and agree that the payment under consideration is contribution for Identity Card and Fund. The amount is non-refundable.

Place :
Date : Applicant's Signature
Enclosed : 1. Xerox Copy of Aadhaar ID, 2. Recent one copy colour photo. 3. Xerox Copy of E-SHRAM CARD

RECEIVED COPY

Name :

Address :

Membership Fees :

Signature (With Stamp)
District President / Secretary / Treasurer

Signature (With Stamp)
Unit President / Secretary / Treasurer