

**OFFICE OF DISTRICT LEGAL SERVICES AUTHORITY, FAZILKA.**

**APPLICATION FOR ENROLMENT AS PARA LEGAL VOLUNTEER**

1. Name(In Block Letters) : \_\_\_\_\_
2. Father /Husband Name : \_\_\_\_\_
3. Permanent Address : \_\_\_\_\_  
(along with village name)
4. Correspondence Address: \_\_\_\_\_
5. Date of Birth : \_\_\_\_\_
6. Qualification : \_\_\_\_\_
7. Nationality : \_\_\_\_\_
8. Experience in Social Activities : \_\_\_\_\_
9. Special aptitude, if any : \_\_\_\_\_
10. List of documents attached: \_\_\_\_\_
11. Telephone/Mobile No. : \_\_\_\_\_
12. E-mail ID : \_\_\_\_\_

Dated:- \_\_\_\_\_

Signature of the applicant