## [FORM 19 [See rule 31]

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

PHOTO of the applicant

То			
The Electoral Registration Officer,			
(Teachers') Constitue	ency.		
·	•		
Sir,			
I request that my name be reg	istered in the electoral rol	for the	(teachers') Constituency.
The particulars are:—			
Name (in full)	Se	ζ	
Father's/Mother's/Husband's name (in 1			
House address (Place of ordinary resid			
House No			
Street/Mohalla			
Town/Village			
Post Office			
Police Station/Tehsil/Taluka/Mouza			
District			
Age			
Whether registered as an elector for any ass	sembly constituency		
If yes, then mention the following			
(a) Number and name of the assemble	·		
(b) Part/polling station No.( if known			
(c) Date of birth			
(d) EPIC number(if any)			
(ii) Landline			
Email id (if any)			
2. During the last six years I have been	engaged in teaching for a	a total period of more than the	ee years as follows:
Name of Educational Institution	From (Date)	To (Date)	Period
1.			
2.			
3.			
4.			
In support of the above I submit herewi	th		
3. *My name has not been included in t	he electoral roll for this or Ol		ency.
*My name has been included in the ele	_		der the address given below
and I request that it be deleted from that	it roll:—		

4. I declare that I am a citizen of India and that all the particulars given above are true to belief.	the best of my knowledge and
Place Date	
NOTE:-Any person who makes a statement or declaration which is false and which he either kno does not believe to be true is punishable under section 31 of the Representation of the People Ac *Strike out the paragraph not applicable.	
(Perforation)	
Intimation of action taken	
The application in Form 19 of Shri/Shrimati/Kumari	
addresshas been—	
(a) accepted and the name of Shri/Shrimati/Kumari	registered at Serial
Noin Part Noin	
(b) rejected for the reason	
Date	
<b>Dato</b>	Electoral Registration Officer
	(Address)
	]
(Perforation)	
Received the application in Form 19 from Shri/Shrimati/ Kumari*	
address*	
Date	
	Electoral Registration Officer (Address)
** 1 CU 1: 1 U C	(Address)]
*To be filled in by the applicant.	