## MODEL FORM OF APPLICATION U/S 6(1) OF RIGHT TO INFORMATION ACT, 2005, FOR SEEKING INFORMATION

To,			

(name and designation)
Central Public Information Officer,
Indian Agricultural Research Institute,
New Delhi-110012

		PART - I		
1.	Name of the applicant			
2.	Date of Birth			
3.	Gender (Male / Female)			
4.	Father's Full name			
5.	Mother's full name			
6.	Present address			
		Pin Code		
	Tel. No. (Off.)			
	(Mob.)			
	(Resi.)			
7.	Permanent address			
		Pin Code		
8.	Email I.D./Fax, if any			
9.	Proof of Residence			
	(Ration Card/ Election Voter's Card/ Passport / Driving Licence) (Please attach photocopy)			

10.	Designation & Division				
	(If IARI employee)				
	PART- II				
11.	(i) Specify the particulars of the information sought (a separate sheet may be attached, if necessary)				
	(ii) Whether the information sought for is required to be supplied:				
	(a) In printed form				
	(b) In diskette or floppy				
	(iii) Whether inspection of records also sought				
	(iv) Whether application fee of Rs. 10/- (Rupees Ten only) paid and, if so, please specify mode of payment				
	a) Please give details of the demand draft/Banker's cheque enclosed				
	(b) In case of cash payment, please enclose original receipt				
	(No fee is required to be paid if the requester belongs to <b>'below poverty line'</b> category for which proof should be furnished).				
	DECLARATION OF THE APPLICANT				
12.	<ul> <li>I am a bona fide citizen of India and owe allegiance to the sovereignty, unity and integrity of India and have not voluntarily acquired the citizenship of another country.</li> </ul>				
	(ii) The information given by me in this form is true and I am solely responsible for its accuracy.				
Place	· · · · · · · · · · · · · · · · · · ·				
Date:	(Signature of the applicant)				
Enclo	sure:				
	1				
	2				
	3				