

**MINISTRY OF LAW AND JUSTICE****(Legislative Department)****NOTIFICATION**

New Delhi, the 17th June, 2022

**S.O. 2802(E).**—In exercise of the powers conferred by section 28 of the Representation of the People Act, 1950 (43 of 1950), the Central Government, after consulting the Election Commission of India, hereby makes the following rules further to amend the Registration of Electors Rules, 1960, namely:—

1.(1) These rules may be called the Registration of Electors (Amendment) Rules, 2022.

(2) They shall come into force on the 1st day of August, 2022.

2. In the Registration of Electors Rules, 1960 (hereinafter referred to as the said rules), in rule 5, in sub-rules (2) and (3), for the words “his wife” at both the places where they occur, the words “his or her spouse” shall be substituted.

3. For rule 13 of the said rules, the following rule shall be substituted, namely:—

**“13. Form for claims and objections.**— (1) Every claim for inclusion of name in the roll as new elector shall be in Form 6 and signed by the applicant.

(2) Every objection to the proposed inclusion of name or application for deletion of name in existing roll shall be in Form 7 and preferred by a person whose name is in such roll.

(3) Every objection to a particular or particulars in any entry in the roll or application for shifting of residence within the constituency or outside the constituency or application for correction or updation of entries shall be in Form 8 and shall be preferred by the person to whom that entry relates.”.

4. In rule 14 of the said rules,—

(i) in the opening portion, for the words, “for correction of particulars or transposition of entries”, the words “for correction of entries in existing electoral roll or application for shifting of residence within the constituency or outside the constituency” shall be substituted;

(ii) in clause (a), after the words “the registration officer”, the words, “of the constituency in which the applicant is ordinarily residing” shall be inserted.

5. In rule 15 of the said rules,—

(i) in sub-rule (1), for clause (a), the following clause shall be substituted, namely:—

“(a) maintain in duplicate a list of claims in Form 9, a list of objections to the inclusion of names in Form 10, a list of objections to entries in the existing electoral roll or application for corrections or updation of entries in Form 11 and a list of applications for shifting of residence within the constituency in Form 11A and a list of application for shifting of residence outside the constituency in Form 11B; and”;

(ii) in sub-rule (2), for the words “particulars or transposition of entries”, the words “entries in existing electoral roll or application for correction or updation of entries or application for shifting of residence within the constituency or outside the constituency” shall be substituted.



6. In rules 16 of the said rules, for clause (a), the following clause shall be substituted, namely:—

“(a) maintain in duplicate the five lists in Forms 9, 10, 11, 11A and 11B, entering thereon the particulars of every claim or objection or application for correction of entries in existing electoral roll or application for correction or updation of entries or application for shifting of residence within the constituency or outside the constituency as and when it is received by him whether directly under rule 14 or on being forwarded under rule 15; and”.

7. In rule 26 of the said rules,—

(i) in sub-rule (1), for the figures, letters and word “6, 6A, 7, 8, 8A and 8B”, the figures, letter and word “6, 6A, 7 and 8” shall be substituted;

(ii) for sub-rule (1A), the following sub-rule shall be substituted, namely:—

“(1A) Every such application as is referred to in sub-rule (1), with reference to qualifying dates, that is to say the 1st day of January, the 1st day of April, the 1st day of July and the 1st day of October of the year, shall be presented to the registration officer in such manner as the Election Commission may direct.”.

8. After rule 26 of the said rules, the following rules shall be inserted, namely:—

**“26A. Merger and integration of list of amendments.—** The list of amendments prepared with reference to the qualifying dates as specified in sub-rule (1A), shall be merged and integrated with the last finally published roll and published as draft roll under rule 10, before every election and bye-election and shall be put in public domain with reference to the qualifying date, proximate to the said election, as the Election Commission may direct.

**26B. Special provision for providing Aadhaar number by existing electors.—** Every person whose name is listed in the roll may intimate his Aadhaar number to the registration officer in Form 6B in accordance with sub-section (5) of section 23 of the Act.”.

9. For Forms 1, 2, 2A and 3 to the said rules, the following Forms shall, respectively, be substituted, namely:—



<b>"Form- 1"</b> (See rule 7)		SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND										
<b>The Registration of Electors Rules, 1960</b> <b>Statement as to place of Ordinary Residence by a Person holding a Declared Office</b>												
<b>Personal Details</b>												
Full Name												
Relation Name												
Relation Type	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Others											
Age	<input type="checkbox"/> Years <input type="checkbox"/> Month    Date of Birth <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>		d	d	/	m	m	/	y	y	y	y
d	d	/	m	m	/	y	y	y	y			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female											
Office held												
EPIC No. (If issued)												
<b>Aadhaar Details:-</b> (Please tick the appropriate box)												
(a) <input type="checkbox"/> Aadhaar Number <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> or												
(b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number												
Mobile No. (optional)	<table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>											
Email Id (optional)												
I hereby declare that I am a citizen of India and that but for my holding the above-mentioned office, I would have been ordinarily resident at:-												
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">House/Building/Apartment No.</td> <td style="width: 50%;">Street/Mohalla</td> </tr> <tr> <td>Locality</td> <td>Town/Village</td> </tr> <tr> <td>Post Office</td> <td>Police Station</td> </tr> <tr> <td>Tehsil/Taluqa/Mandal</td> <td>PIN Code</td> </tr> <tr> <td>District</td> <td>State/UT</td> </tr> </table>			House/Building/Apartment No.	Street/Mohalla	Locality	Town/Village	Post Office	Police Station	Tehsil/Taluqa/Mandal	PIN Code	District	State/UT
House/Building/Apartment No.	Street/Mohalla											
Locality	Town/Village											
Post Office	Police Station											
Tehsil/Taluqa/Mandal	PIN Code											
District	State/UT											
Assembly Constituency _____												
I further declare that my spouse (Husband/Wife) Shri./Smt. _____												
Age <input type="checkbox"/> Years <input type="checkbox"/> Months    Date of Birth <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>			d	d	/	m	m	/	y	y	y	y
d	d	/	m	m	/	y	y	y	y			
ordinarily resides with me and is a citizen of India.												
I, further, declare that I *and my spouse have neither got *ourselves/myself already registered nor have applied for such registration as ordinary electors in the electoral roll of the place where I am presently posted and residing or any other constituency.												
I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name *or my spouse's name so appear at different places, the same may be deleted from all such places except from the electoral roll of my native place for which I have made the statement.												
Date: _____												
		_____ (Signature)										
<b>(For use in the Election Office)</b>												
Statement received on the _____ 20 _____												
Registered in the electoral roll for the _____ Assembly Constituency												
No. _____ Part No. _____ at S. No. _____												
Date: _____ Electoral Registration Officer _____												
* Strike off if not applicable												



<b>Form- 2</b> (See rule 7) <b>The Registration of Electors Rules, 1960</b> <b>Statement as to place of Ordinary Residence by member of the Armed Forces</b>		SPACE FOR PASTING ONE RECENT UNUSUAL PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND										
<b>Personal Details</b>												
Full Name												
Relation Name												
Relation Type	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Other											
Age	<input type="checkbox"/> Years <input type="checkbox"/> Month    Date of Birth <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td></tr> </table>		d	d	/	m	m	/	y	y	y	y
d	d	/	m	m	/	y	y	y	y			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female											
EPIC No. (If issued)												
Aadhaar Details:- (Please tick the appropriate box)												
(a) <input type="checkbox"/> Aadhaar Number <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> or												
(b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number												
Mobile No. (optional)	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>											
Email Id (optional)												
I hereby declare that I am a citizen of India and that but for my service in Armed Forces I would have been ordinarily resident at:-												
House/Building/Apartment No.	Street/Mohalla											
Locality	Town/Village											
Post Office	Police Station											
Tehsil/Taluqa/Mandal	PIN Code											
District	State/UT											
Assembly Constituency												
<b>Service Details</b>												
Service/Buckle No. _____												
Rank _____												
Name of Armed Force _____												
Service/Corps/Regiment _____												
Name and Address of Record Office _____												
I further declare that my spouse (Husband/Wife) Shri./Smt. _____												
Age <input type="checkbox"/> Years <input type="checkbox"/> Months    Date of Birth <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td></tr> </table>			d	d	/	m	m	/	y	y	y	y
d	d	/	m	m	/	y	y	y	y			
ordinarily resides with me and is a citizen of India.												
I, further, declare that I *and my spouse have neither got *ourselves/myself already registered nor have applied for such registration as ordinary electors in the general part of the electoral roll of the place where I am presently posted and residing or any other constituency.												
I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name *or my spouse's name so appears at different places, the same may be deleted from all such places except from the last part of the electoral roll of my native place for which I have made the statement.												
Date: _____		(Signature) _____										
Record Office/Commandant's Office		Verified and found Correct										
Folio No. _____		(Signature) _____										
Place _____		(Designation) _____										
Date _____		Officer-in-Charge, Records. _____										
<b>(For use in the Election Office)</b>												
Statement received on the _____		20 _____										
Registered in the electoral roll for the _____		Assembly Constituency _____										
No. _____	Service Voter's Part, at S.No. _____											
Date: _____	Electoral Registration Officer _____											
* Strike off if not applicable												




Form- 2A <small>(See rule 7)</small>		SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND										
<b>The Registration of Electors Rules, 1960</b> <b>Statement as to place of Ordinary Residence by a member of the Armed police force of a State, who is serving outside that State</b>												
<b>Personal Details</b>												
Full Name												
Relation Name												
Relation Type	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Others											
Age	<input type="checkbox"/> Years <input type="checkbox"/> Month    Date of Birth: <table style="display: inline-table; border-collapse: collapse;"> <tr> <td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>		d	d	/	m	m	/	y	y	y	y
d	d	/	m	m	/	y	y	y	y			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female											
EPIC No. (If issued)												
Aadhaar Details:- (Please tick the appropriate box)												
(a) <input type="checkbox"/> Aadhaar Number _____ or												
(b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number												
Mobile No. (optional)												
Email Id (optional)												
I hereby declare that I am a citizen of India and that but for my service outside the state in armed police forces mentioned below, I would have been ordinarily resident at:-												
House/Building/Apartment No.	Street/ Mohalla											
Locality	Town/Village											
Post Office	Police Station											
Tehsil/Taluqa	Pin Code											
District	State/UT											
Assembly Constituency _____												
<b>Service Details</b>												
Service /Buckle No. _____												
Rank _____												
Name of Armed police Force _____												
Name and Address of office of the Commandant _____ _____												
I further declare that my spouse (Husband/Wife) Shri./Smt. _____												
Age <input type="checkbox"/> Years <input type="checkbox"/> Months    Date of Birth: <table style="display: inline-table; border-collapse: collapse;"> <tr> <td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>			d	d	/	m	m	/	y	y	y	y
d	d	/	m	m	/	y	y	y	y			
ordinarily resides with me and is a citizen of India.												
I, further, declare that I *and my spouse have neither got *ourselves/myself already registered nor have applied for such registration as ordinary electors in the general part of electoral roll of the place where I am presently posted and residing or any other constituency.												
I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name *or my spouse's name so appears at different places, the same may be deleted from all such places except from the last part of the electoral roll of my native place for which I have made the statement.												
Date: _____		(Signature) _____										
Commandant's Office		Verified and found Correct										
Folio No. _____		(Signature) _____										
Place _____		(Designation) _____										
Date _____		Commandant _____										
<b>(For use in the Election Office)</b>												
Statement received on the _____		20 _____										
Registered in the electoral roll for the _____		Assembly Constituency _____										
No. _____		Service Voter's Part, at S.No. _____										
Date: _____		Electoral Registration Officer _____										
* Strike off if not applicable												



Form-3 (See rule 7) <b>The Registration of Electors Rules, 1960</b>		SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (3.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND																				
<b>Statement as to place of Ordinary Residence by a Person employed under the Government of India in a post outside India</b>																						
<b>Personal Details</b>																						
Full Name																						
Relation Name																						
Relation Type	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Other																					
Age	<input type="checkbox"/> Years <input type="checkbox"/> Month    Date of Birth <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>		d	d	/	m	m	/	y	y	y	y										
d	d	/	m	m	/	y	y	y	y													
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female																					
EPIC No. (If issued)																						
Aadhaar Details:- (Please tick the appropriate box)																						
(a) <input type="checkbox"/> Aadhaar Number <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> or																						
(b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number																						
Mobile No. (optional)	<table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					
Email Id (optional)																						
I hereby declare that I am a citizen of India and that but for my being employed under Government of India in the below-mentioned post, I would have been ordinarily resident at (full postal address):-																						
House/Building/Apartment No.	Street/Mohalla																					
Locality	Town/Village																					
Post Office	Police Station																					
Tehsil/Taluqa/Mandal	PIN Code																					
District	State/UT																					
Assembly Constituency																						
<b>Service Details</b>																						
Unique Id No.																						
Description of post held outside India																						
Address of Head of Office																						
I further declare that my spouse (Husband/Wife) Shri./Smt.																						
Age	<input type="checkbox"/> Years <input type="checkbox"/> Months    Date of Birth <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr> <td>d</td><td>d</td><td>/</td><td>m</td><td>m</td><td>/</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>		d	d	/	m	m	/	y	y	y	y										
d	d	/	m	m	/	y	y	y	y													
ordinarily resides with me and is a citizen of India.																						
I, further, declare that I *and my spouse have neither got *ourselves/myself already registered nor have applied for such registration as ordinary electors in the general part of electoral roll of the place where I am presently posted and residing or any other constituency.																						
I also declare that I am aware of the law that prohibits getting registered as an elector at more than one place either in the same constituency or in different constituencies and if my name *or my spouse's name so appears at different places, the same may be deleted from all such places except from the last part of the electoral roll of my native place for which I have made the statement.																						
Date:																						
		(Signature)																				
<b>Verified and found Correct</b>																						
(Signature)																						
(Designation of the Head of Office)																						
<b>(For use in the Election Office)</b>																						
Statement received on the	20																					
Registered in the electoral roll for the	Constituency																					
No.	Service Voter's Part, at S.No.																					
Date:	Electoral Registration Officer																					
* Strike off if not applicable																						



10. For Form 6 to the said rules, the following Form shall be substituted, namely:—

	<b>"Form-6"</b> [See rules 13(1) and 26] <b>ELECTION COMMISSION OF INDIA</b> <b>Application Form for New Voters</b>	FORM No. _____ ('To be filled by office')
To, The Electoral Registration Officer, No. & Name of Assembly Constituency      No. <input type="text"/> Name <input type="text"/> Or No. & Name of Parliamentary Constituency@      No. <input type="text"/> Name <input type="text"/> (@ only for Union Territories not having Legislative Assembly) I submit application for inclusion of my name in the electoral roll for the above constituency.		
(1)(a) Name (In Official Language of State) First Name followed by Middle Name <input type="text"/> Surname (if any) <input type="text"/> (1)(b) Name (In English in BLOCK LETTERS) First Name followed by Middle Name <input type="text"/> Surname (if any) <input type="text"/> <i>Disclaimer: If name not filled in English, it will be transliterated by software.</i>		
SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND		
*(2)(a) Name and Surname (In official language of State) of any one of the relatives:- <input type="checkbox"/> Father      Or <input type="checkbox"/> Mother      Or <input type="checkbox"/> Husband      Or <input type="checkbox"/> Wife      Or <input type="checkbox"/> Legal Guardian in case of orphan/Guru in case of Third Gender <input type="text"/> *(2)(b) Name and Surname (In English in BLOCK LETTERS) of the relative mentioned above <input type="text"/>		
(3) Mobile No. of Self (if available)      (or) <input type="text"/> Of relative mentioned at Item No. 2 (4) Email ID of Self (If available)      (or) <input type="text"/> Of relative mentioned at Item No. 2		
(5) Aadhaar Details:- (Please tick the appropriate box) (a) <input type="checkbox"/> Aadhaar Number <input type="text"/> or (b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number.		
(6) Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender		
(7) (a) Date of Birth <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
(b) Self attested copy of document supporting age proof attached (anyone of the following) (i) <u>Document for Proof of Date of Birth</u> ^:- (Any one of these) 1. <input type="checkbox"/> Birth certificate issued by Competent Local Body/Municipal Authority/Registrar of Births & Deaths 2. <input type="checkbox"/> Aadhaar Card      3. <input type="checkbox"/> PAN Card      4. <input type="checkbox"/> Driving License 5. <input type="checkbox"/> Certificates of Class X or Class XII issued by CBSE/ICSE/ State Education Boards, if it contains Date of Birth      6. <input type="checkbox"/> Indian Passport (ii) <u>Any Other Document for Proof of Date of Birth</u> :- (If none of the above documents is available) (Pl. Specify)		
(8) (a) Present Ordinary Residence (Full Address)	House/Building/Apartment No. Town/Village PIN Code District	Street/Area/Locality/ Mohalla/Road Post Office Tehsil/Taluqa/Mandal State/UT



(b) Self-attested copy of address proof either in the name of applicant or any one of parents/spouse/adult child, if already enrolled as elector at the same address (Attach anyone of them)

(i) Document for proof of residence ^:-

(Any one of these)

- |   |   |
|---|---|
| 1. <input type="checkbox"/> Water/Electricity/Gas connection Bill for that address (atleast 1 year) | 2. <input type="checkbox"/> Aadhaar Card                                |
| 3. <input type="checkbox"/> Current passbook of Nationalized/Scheduled Bank/Post Office             | 4. <input type="checkbox"/> Indian Passport                             |
| 5. <input type="checkbox"/> Revenue Department's Land Owning records including Kisan Bahi           |   |
| 6. <input type="checkbox"/> Registered Rent Lease Deed (In case of tenant)                          | 7. <input type="checkbox"/> Registered Sale Deed (In case of own house) |

(ii) Any Other document for Proof of residence: -

(If none of the above documents is available) (Pl. Specify) # \_\_\_\_\_

(9) Category of disability, if any(Optional)

☐ Locomotive

☐ Visual

☐ Deaf & Dumb

If any other (Give description) \_\_\_\_\_

Percentage of disability: ☐ %, Certificate attached (Tick the appropriate box) ☐ Yes ☐ No

(10) The details of my family member already included in the electoral roll at current address with whom I currently reside are as under:

Name of family member: \_\_\_\_\_ Relationship with applicant: \_\_\_\_\_

His/her EPIC no.: \_\_\_\_\_

#### DECLARATION

I HEREBY DECLARE that to the best of my knowledge and belief-

(i) I am a citizen of India and place of my birth is:- Village/Town \_\_\_\_\_

District \_\_\_\_\_ State/UT \_\_\_\_\_

(ii) I am ordinarily a resident at the address mentioned at Sr. No. 8(a) in Form 6 since \_\_\_\_\_ (mention month and year)

(iii) I am applying for inclusion in Electoral Roll for the first time and my name is not included in any Assembly Constituency/ Parliamentary Constituency.

(iv) I don't possess any of the documents mentioned at (7)(b)(i) above for proof of Date of Birth/Age. Therefore, I have enclosed \_\_\_\_\_ (Name of the document) in support of age proof (Strike off, if not applicable).

(v) I am aware that making the above statement or declaration in relation to this application which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of Representation of the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Applicant/Left Hand Thumb Impression

*Accessibility Instructions:-In the light of provisions of Rights of Persons with Disabilities Act 2016 and Rights of Persons with Disabilities Rules, 2017, in case of persons with intellectual disability, autism, cerebral palsy and multiple disabilities etc., signature or left hand thumb impression of person with disability, or signature or left hand thumb impression of his/her legal guardian will be required.*

#### Note-

\* In case of a married female applicant, name of Husband may preferably be mentioned.

^ Submission of self-attested copy of mentioned document will ensure speedy delivery of services.

# In case none of the mentioned documents is available, field verification is must. As for example, category like homeless Indian citizens who are otherwise eligible to become electors but do not possess any documentary proof of ordinary residence, Electoral Registration Officer shall designate an officer for field verification.

✕

#### Acknowledgement/Receipt for application

✕

Acknowledgment Number \_\_\_\_\_

Date \_\_\_\_\_

Received the application in Form 6 of Shri/Smt./Ms. \_\_\_\_\_

[Applicant can refer the Acknowledgement No. to check the status of application.]

Name/Signature of ERO/AERO/BLO



To be appended to Form-6

(The fields marked with \* are mandatory)

**GUIDELINES FOR FILLING UP THE APPLICATION****FORM-6****1. General Instructions:-**

(a) The application will be addressed to the Electoral Registration Officer (ERO) of the Assembly Constituency (AC)/Parliamentary Constituency (PC) in which the applicant is ordinarily residing. In case the applicant does not know or has any doubt about number and name of Assembly Constituency / Parliamentary Constituency, assistance may be extended by the Electoral Registration Officer and the application will not be rejected on the ground of not mentioning of number and name of Assembly Constituency / Parliamentary Constituency.

(b) The applicant can fill entries of the application either in English or official language of the state and this will not be a ground for rejection of application.

(c) A service personnel, applying for enrolment as general elector in the electoral roll at his place of posting at a peace station, should ensure that he is not already enrolled as service elector or general elector in some other constituency.

\*(d) Photograph: A recent good quality passport size unsigned colour photograph (4.5cm X 3.5cm) with white background should be pasted in the space provided. Eyes must be open and both edges of face must be clearly visible.

(e) Elector's Photo Identity Card (EPIC): EPIC will be delivered at given postal address after enrolment, free of cost through speed post under proper acknowledgement.

2. **Item (1) \*(Name):** The exact name and spelling should be furnished in both official language of the State and English. If filled in only one language, system will transliterate automatically in other language which may lead to spelling mistakes.

3. **Item (2a) & (2b) (Name and Surname of Relative):** In case of a married female applicant, name of husband may preferably be mentioned. (Strike off the inapplicable options in the column).

4. **Item (5) Aadhaar Details:** Aadhaar Number should be furnished for the purpose of authentication of entries. If the applicant does not have Aadhaar number, the same may be mentioned in box at item 5 (b).

**5. Item (6) (Gender):**

\*(a) Gender in the appropriate box provided for 'Male' / 'Female' / 'Third Gender' should clearly be tick marked.

(b) Applicants belonging to Third Gender may indicate their sex as 'Male' or as 'Female' or as 'Third Gender'.

**6. Item 7(a)(b) (Date of Birth):**

\*(a) A self-attested copy of one of the documents mentioned in the form can be attached as age proof. Submission of a document mentioned in the form will ensure speedy registration and delivery of services.

(b) If none of the documents mentioned in the form is available, the applicant should enclose some other document in support of age proof; and name of the said document should be mentioned in item 7(ii) and item (iv) of 'DECLARATION' part in Form. In such case, the applicant will have to appear personally before Electoral Registration Officer or any other officer designated by him for verification.

**7. Item 8 (Present Ordinary Residence):**

\*(a) Complete postal address with PIN code should be mentioned along with a self-attested copy of any of the mentioned documents in name of applicant/parents/spouse as proof of ordinary residence.

(b) Necessary field verification shall be made in cases of Homeless Indian Citizens living in sheds/pavements and sex workers having no documentary proof of ordinary residence, provided they are otherwise eligible for enrollment.


(c) Students, who are eligible for enrollment, can be enrolled either at their parent's place or at the hostel/mess where they are ordinarily residing.

8. **\*DECLARATION:** All entries in "DECLARATION" portion should be completed in all respects. Please note that giving any false statement made in the DECLARATION portion is a punishable offence under section 31 of the Representation of the People Act, 1950 (43 of 1950) with imprisonment with a term which may extend to one year or with fine or with both.









**"Form-7"**  
[See rules 13(2) and 26]

FORM No. \_\_\_\_\_  
(To be filled by office)

**ELECTION COMMISSION OF INDIA**

**Voter Application Form for Objection for Proposed Inclusion/  
Deletion of Name in Existing Electoral Roll**

---

To,

The Electoral Registration Officer,  
No. & Name of Assembly Constituency \_\_\_\_\_

Or No. & Name of Parliamentary Constituency@ \_\_\_\_\_  
(@ only for Union Territories not having Legislative Assembly)

No.    Name \_\_\_\_\_

No.    Name \_\_\_\_\_

I submit application for objection for proposed inclusion/deletion of name in existing electoral roll.

(1) Name of the applicant

EPIC No. \_\_\_\_\_

Mobile No. of Self  or

Mobile No. of Relative

(2) Option of application/objection:- (Tick the appropriate option) (Any one)

☐ (i) I request to delete name of the person mentioned below already included in the current roll due to any one of the following reasons:- (tick any one)

☐ Death

☐ Already enrolled

☐ Under Age

☐ Not Indian Citizen

☐ Absent / Permanently shifted

☐ (ii) I object to proposed inclusion of name of the person mentioned below due to any one of the following reasons - (tick any one)

☐ Death

☐ Already enrolled

☐ Under Age

☐ Not Indian Citizen

☐ Absent / Permanently shifted

☐ (iii) I request to delete my name from electoral roll due to any one of the following reasons-(tick any one)

☐ Permanently shifted

☐ Already enrolled

☐ Not Indian Citizen

Death Certificate attached (Tick the appropriate option) ☐ Yes ☐ No

(3) The details of the person in respect of whom objection has been raised, are as below:-

Name \_\_\_\_\_

Surname \_\_\_\_\_

EPIC No.(if available) \_\_\_\_\_

Address	House/Building/ Apartment No.	Street/Area/Locality/ Mohalla/Road
	Town/Village	Post Office
	PIN Code	Tehsil/Taluqa/Mandal
	District	State/UT

**DECLARATION**

I HEREBY DECLARE that to the best of my knowledge and belief that I am aware that making a statement or declaration which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of Representation of the People Act,1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Applicant/Thumb Impression \_\_\_\_\_

**Accessibility Instructions:-** In the light of provisions of Rights of Persons with Disabilities Act 2016 and Rights of Persons with Disabilities Rules, 2017, in case of persons with intellectual disability, autism, cerebral palsy and multiple disabilities etc., signature or left hand thumb impression of person with disability, or signature or left hand thumb impression of his/her legal guardian will be required.

**Acknowledgement/Receipt for application**

X

Acknowledgment Number \_\_\_\_\_

Date \_\_\_\_\_

Received the application in Form 7 of Shri/Smt./Ms. \_\_\_\_\_

[Applicant can refer the Acknowledgement No. to check the status of application.]

Name/Signature of ERO/AERO/BLO \_\_\_\_\_



To be appended to Form-7

**GUIDELINES FOR FILLING UP THE APPLICATION**  
**FORM-7**

1. **General Instruction:-**

- (a) The application can be made by an elector registered in the existing electoral roll of the constituency.
- (b) The application can be an objection in respect of a registered elector/ an objection to the proposed inclusion of an entry in the electoral roll of the constituency, in which the applicant himself is registered **OR** a request for deletion of the applicant's own name from electoral roll.

2. **Item No. 1 (Name of the applicant)-** The applicant shall mention his name, EPIC no. and mobile number of self 'or' relative (father/mother/husband/legal guardian).


3. **Item No. 2 (Option of objection/application of deletion):-** The applicant has to tick any one option for which he intends to make the application. He must also tick any one of the reasons mentioned below the option, as to why according to him, the person against whom the objection has been made, is not qualified for inclusion in the electoral roll viz. due to death, under age, absent/permanently shifted, already enrolled in the electoral roll at the same place or some other place, not an Indian citizen etc. The onus of proof to substantiate the reason given for objection or removal of name lies with the applicant.

4. **Item No. 3 (Details of the person in respect of whom objection has been made):-** The applicant has to fill up the name, surname, EPIC number and address of the person whose entry is objected to for inclusion or sought to be deleted.

5. **DECLARATION:-** The applicant must give a 'DECLARATION' that the facts and particulars mentioned in the application are true to the best of his/her knowledge and belief.

**Please note that giving any false statement made in the DECLARATION portion is a punishable offence under section 31 of the Representation of the People Act, 1950 (43 of 1950) with imprisonment with a term which may extend to one year or with fine or with both.**



	<b>Form-8</b> [See rules 13(3) and 26] <b>ELECTION COMMISSION OF INDIA</b> <b>Voter Application Form for shifting of Residence/Correction of Entries in Existing Electoral Roll/Replacement of EPIC/Marking of PwD</b>	FORM No. _____ (To be filled by office)
To, The Electoral Registration Officer, No. & Name of Assembly Constituency _____ No. <input type="text"/> Name _____ Or No. & Name of Parliamentary Constituency@ _____ No. <input type="text"/> Name _____ (@ only for Union Territories not having Legislative Assembly)		
(I) Name of the applicant <input style="width: 70%;" type="text"/> EPIC No. _____ Aadhaar Details:- (Please tick the appropriate box) (a) <input type="checkbox"/> Aadhaar Number <input style="width: 20%;" type="text"/> or (b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number. Mobile No. of Self (or) <input style="width: 20%;" type="text"/> Mobile No. of Father/Mother/Any other relative (if available) <input style="width: 20%;" type="text"/> Email Id of Self (or) _____ Email Id of Father/Mother/Any other relative (if available) _____		
(II) I submit application for (Tick any one of the following) 1. <input type="checkbox"/> Shifting of Residence (or) 2. <input type="checkbox"/> Correction of Entries in Existing Electoral Roll (or) 3. <input type="checkbox"/> Issue of Replacement EPIC without correction (or) 4. <input type="checkbox"/> Request for marking as Person with Disability		
<b>1. Application for Shifting of Residence</b> I have shifted my residence and I request that my name may be deleted from the previous address and shifted to the current address mentioned below. I request that a replacement EPIC may be issued to me due to change in my address. I hereby return my old EPIC.		
Present Ordinary Residence (Full Address)	House/Building/Apartment No. _____ Town/Village _____ PIN Code _____ District _____	Street/Area/Locality/ Mohalla/Road _____ Post Office _____ Tehsil/Taluqa/Mandal _____ State/UT _____
Self-attested copy of address proof either in the name of applicant or anyone of the parents/spouse/adult child, if already enrolled with as elector at the same address (Attach any one of the documents mentioned below ^):- 1. <input type="checkbox"/> Water/Electricity/Gas connection Bill for that address (atleast 1 year)      2. <input type="checkbox"/> Aadhaar Card 3. <input type="checkbox"/> Current passbook of Nationalized/Scheduled Bank/Post Office      4. <input type="checkbox"/> Indian Passport 5. <input type="checkbox"/> Revenue Department's Land Owning records including Kisan Bahi 6. <input type="checkbox"/> Registered Rent Lease Deed (In case of tenant)      7. <input type="checkbox"/> Registered Sale Deed (In case of own house) Any Other:- (Pl. Specify) _____		



## Name/Signature of ERO/AERO/BLO



To be appended to Form-8

**GUIDELINES FOR FILLING UP THE APPLICATION**  
**FORM-8**

1. **General Instruction:-**
  - (a) The application can be made by a registered/enrolled elector for shifting of residence, or for correction of entries or for issue of replacement EPIC or for marking as PwD.
  - (b) In case of approval of application by Electoral Registration Officer (ERO) for shifting of residence, correction of entries and issue of replacement EPIC without correction, a new replacement EPIC will be issued to the applicant and he has to return his old EPIC to the Electoral Registration Officer immediately.
2. **Item No. I (Name of the applicant)-** The applicant shall mention his name, EPIC no., Aadhaar number, mobile number and email id of self or relative mentioned therein. Aadhaar Number should be furnished for the purpose of authentication of entries. If the applicant does not have Aadhaar number, the same may be mentioned in box at item I (b).
3. **Item No. II (Option for application)-** The applicant has to tick any one of the options for making application and fill the details in the relevant section of the application. All other sections which are not relevant should be struck off.
4. **Application for shifting of residence-**
  - (a) The application has to be made to the Electoral Registration Officer of the constituency in which the new address of the applicant is located.
  - (b) The applicant has to mention his new address, where he has shifted to and presently staying and attach a self-attested copy of any one of the mentioned documents as address proof in his own name or in name of his parents/spouse. He has to tick the mentioned document which he has given as address proof. Mentioned document will ensure speedy delivery of services. If he does not possess any of the mentioned documents, he has to mention name of the other document given for address proof in the blank space.
5. **Application for correction of entries in existing roll-**
  - (a) If an applicant intends to get any existing entry relating to him in the electoral roll corrected, he has to tick in the appropriate box and attach the document in the support of his claim. The name of the document must be mentioned in the blank space given.
  - (b) In case, the applicant desires to change his photograph, he has to paste a recent good quality passport size unsigned colour photograph (4.5 cm X 3.5 cm) with white background, in the box meant for it.
6. **Application for replacement EPIC without correction-** The applicant shall put a tick in appropriate box seeking for a replacement EPIC. He shall return his mutilated/old EPIC or submit a copy of FIR/Police report for lost EPIC.
7. **DECLARATION-** The applicant must give a 'DECLARATION' that the facts and particulars mentioned in the application are true to the best of his/her knowledge and belief.  
Please note that giving any false statement made in the DECLARATION portion is a punishable offence under section 31 of the Representation of the People Act, 1950 (43 of 1950) with imprisonment with a term which may extend to one year or with fine or with both. ”.



14. For Forms 11 and 11A to the said rules, the following Forms shall be substituted, namely:—

**“FORM 11**

[See rules 15 and 16]

**LIST OF OBJECTIONS/ APPLICATION FOR CORRECTION OF ENTRIES/REPLACEMENT OF EPIC/ MAKING OF PWD RECEIVED IN FORM 8**

Designated location identity (where applications have been received)		Constituency (Assembly/Parliamentary <sup>£</sup> Constituency		Revision Identity			
1. List number <sup>@</sup>		2. Period of receipt of applications (covered in this list)		From date		To date	
				...../...../.....		...../...../.....	
3. Place of hearing <sup>*</sup>							
Serial Number <sup>§</sup> of application	Date of receipt	Name of elector objecting/ making application	Reasons for objection/ applications			Date of hearing <sup>*</sup>	Time of hearing <sup>*</sup>
			Whether correction of entry (Y/N)	Whether replacement of EPIC (Y/N)	Whether marking of PwD		
1	2	3	4	5	6	7(a)	7(b)
<sup>£</sup> In case of union territories having no Legislative Assembly <sup>@</sup> For this revision for this designated location <sup>*</sup> Place, time and date of hearing as fixed by Electoral Registration Officer. <sup>§</sup> Running serial number is to be maintained for each revision for each designated location			Date of exhibition at designated location under rule 15 (b)			Date of exhibition at Electoral Registration Officer's office under rule 16(b)	

**FORM 11A**

[See rules 15 and 16]

**LIST OF APPLICATIONS FOR SHIFTING OF ADDRESS WITHIN THE CONSTITUENCY RECEIVED IN FORM 8**

Designated location identity (where applications have been received)		Constituency (Assembly/Parliamentary <sup>£</sup> Constituency		Revision Identity	
1. List number <sup>@</sup>		2. Period of receipt of application (covered in this list)		From date	
				...../...../.....	
				To date	
				...../...../.....	



3. Place of hearing*				
Serial Number <sup>§</sup> of application	Date of receipt	Name of elector objection/ making application	New Address (Present place of ordinary residence)	Date/Time hearing*
1	2	3	4	5
£ In case of union territories having no Legislative Assembly @ For this revision for this designated location *Place, time and date of hearing as fixed by Electoral Registration Officer. § Running serial number is to be maintained for each revision for each designated location			Date of exhibition at designated location under rule 15(1) (b)	Date of exhibition at Electoral Registration Officer's office under rule 16(b)

**FORM 11B**


[See rules 15 and 16]

**LIST OF APPLICATIONS FOR SHIFTING OF ADDRESS OUTSIDE THE CONSTITUENCY  
RECEIVED IN FORM 8**

Designated location identity (where applications have been received)	Constituency (Assembly/Parliamentary <sup>£</sup> Constituency	Revision Identity		
1. List number <sup>@</sup>	2. Period of receipt of application (covered in this list)	From date	To date	
		...../...../.....	...../...../.....	
3. Place of hearing*				
Serial Number <sup>§</sup> of application	Date of receipt	Name of elector objection/ making application	New Address (Present place of ordinary residence)	Date/Time hearing*
1	2	3	4	5
£ In case of union territories having no Legislative Assembly @ For this revision for this designated location *Place, time and date of hearing as fixed by Electoral Registration Officer. § Running serial number is to be maintained for each revision for each designated location			Date of exhibition at designated location under rule 15(1) (b)	Date of exhibition at Electoral Registration Officer's office under rule 16(b)".



15. For Forms 18 and 19 to the said rules, the following Forms shall, respectively, be substituted, namely:—

	<p><b>"Form-18"</b> (See Rule 31)</p> <p><b>ELECTION COMMISSION OF INDIA</b></p> <p><b>Claim for inclusion of name in the electoral roll for a Graduates' Constituency</b></p>	SPACE FOR PASTING ONE RECENT UNSIGNED PASSPORT SIZE COLOR PHOTOGRAPH (4.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITH WHITE BACKGROUND
<p>To,</p> <p>The Electoral Registration Officer,</p> <p>_____ (Graduates) Constituency.</p>		
<p>Sir,</p> <p>I request that my name be registered in the electoral roll for the.....(Graduates') Constituency.</p>		
<p>1. The particulars are:-</p>		
<p>Full Name <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span></p>		<p>Sex <span style="border: 1px solid black; display: inline-block; width: 50px; height: 1.2em; vertical-align: middle;"></span></p>
<p>Father's/Mother's/Husband's Name (in full) <span style="border: 1px solid black; display: inline-block; width: 200px; height: 1.2em; vertical-align: middle;"></span></p>		
<p>Qualification _____</p>		
<p>Occupation _____</p>		
<p>House Address (Place of ordinary residence)</p>		
<p>House/Building/Apartment No. _____</p>		<p>Street/ Mohalla _____</p>
<p>Town/Village _____</p>		<p>Post Office _____</p>
<p>Police Station/Tehsil/Taluqa/Mouza _____</p>		
<p>District _____</p>		<p>State _____</p>
<p>Age <span style="border: 1px solid black; display: inline-block; width: 20px; height: 1.2em; vertical-align: middle;"></span> Years <span style="border: 1px solid black; display: inline-block; width: 20px; height: 1.2em; vertical-align: middle;"></span> Months</p>		
<p>Date of Birth <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span></p>		
<p>Disability (if any):- (Tick appropriate box) (optional Field)</p>		
<p><input type="checkbox"/> Visual impairment <input type="checkbox"/> Speech &amp; hearing disability <input type="checkbox"/> Locomotor disability <input type="checkbox"/> Other</p>		
<p>Whether registered as an elector for any assembly constituency _____</p>		
<p>If yes, then mention the following---</p>		
<p>(a) Number and Name of the Assembly constituency _____</p>		
<p>(b) Part/Polling Station No. (if known) _____</p>		
<p>(c) Date of Birth <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span></p>		
<p>(d) EPIC Number (if any) _____</p>		
<p>Aadhaar Details:- (Please tick the appropriate box)</p>		
<p>(a) <input type="checkbox"/> Aadhaar Number <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span></p>		<p>or</p>
<p>(b) <input type="checkbox"/> I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number</p>		
<p>Contact Number :-</p>		
<p>Mobile No. (optional) <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span></p>		
<p>Landline <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span></p>		
<p>Email Id (if any) _____</p>		
<p>2. *I am a graduate of the.....University having passed the degree/diploma examination in the year .....</p>		
<p>OR</p>		
<p>*I am in possession of a diploma/certificate in.....which is a qualification equivalent to that of a graduate University in India having passed the examination for the diploma/certificate in the year.....</p>		



3. In support of my claim as being a graduate/in possession of the above diploma/certificate. I submit herewith.....

4. \*\*My name has not been included in the electoral roll for this or any other graduates' constituency.

OR

\*\*My name has been included in the electoral roll for the.....graduates' constituency under the address given below and I request that it be deleted from that roll

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. I declare that I am a citizen of India and that all the particulars given above are true to the best of my knowledge and belief.

Place \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of claimant

NOTE : Any person who makes a statement or declaration which is false and which he either knows or believes to be false or does not believe to be true is punishable under section 31 of the Representation of the People Act, 1950.

\*Strike off the paragraph not applicable.

\*\*Strike off the inappropriate alternative.

.....(Perforation).....

Intimation of action taken

The application in Form 18 of Shri/Smt./Kumari.....address.....has been—

- (a) accepted and the name of Shri/Smt./Kumari.....has been registered at Serial No.....in Part No.....  
(b) rejected for the reason.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

.....(Perforation).....

Receipt of application

Received the application in Form 18 from Shri/ Smt./Kumari\*.....address\*.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*To be filled in by the applicant



**Form-19**

(See Rule 31)

**ELECTION COMMISSION OF INDIA****Claim for inclusion of name in the electoral roll for a Teachers' Constituency**

To,  
The Electoral Registration Officer,  
\_\_\_\_\_ (Teachers') Constituency.

SPACE FOR PASTING ONE  
RECENT UNSIGNED  
PASSPORT SIZE COLOR  
PHOTOGRAPH (4.5 CM X  
3.5 CM) SHOWING  
FRONTAL VIEW OF FULL  
FACE WITH WHITE  
BACKGROUND

Sir,

I request that my name be registered in the electoral roll for the.....(Teachers') Constituency.

The particulars are:-

Full Name  Sex

Father's/Mother's/Husband's Name (in full)

House Address (Place of ordinary residence)

House/Building/Apartment No.	Street/ Mohalla
Town/Village	Post Office
Police Station/Tehsil/Taluqa/Mouza	
District	State

Age  Years  Months Date of Birth

Disability (if any):- (Tick appropriate box) (optional Field)

☐ Visual impairment ☐ Speech & hearing disability ☐ Locomotor disability ☐ Other

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) \_\_\_\_\_

Aadhaar Details:- (Please tick the appropriate box)

- (a) ☐ Aadhaar Number  or
- (b) ☐ I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Contact Number :-

Mobile No. (optional)

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 teachers' constituency.

OR

\*My name has been included in the electoral roll for the.....teachers' constituency under the address given below 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 above are true to the best of my knowledge and belief.

Place \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of claimant

NOTE : Any person who makes a statement or declaration which is false and which he either knows or believes to be false or does not believe to be true is punishable under section 31 of the Representation of the People Act, 1950.

\*Strike off the paragraph not applicable.

.....(Perforation).....

Intimation of action taken

The application in Form 19 of Shri/Smt./Kumari..... address

..... has been-

(a) accepted and the name of Shri/Smt./Kumari.....has been registered at Serial No..... in Part No.....

(b) rejected for the reason.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

.....(Perforation).....

Receipt of application

Received the application in Form 18 from Shri/ Shrimati/Kumari\*.....

address\*.....

Date \_\_\_\_\_

Electoral Registration Officer,  
(Address) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\*To be filled in by the applicant".

[F. No. H-11019/4/2019-Leg.II]

DIWAKAR SINGH, Jt. Secy. and Legislative Counsel

**Note :** The principal rules were published in the Gazette of India, Extraordinary *vide* notification number S.O. 2750(E), dated the 10<sup>th</sup> November, 1960 and the rules were lastly amended *vide* number S.O. 2968(E), dated the 16<sup>th</sup> September, 2016.