



Form-19

(See Rule31)

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.

1. 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 19 from Shri/Shrimati/Kumari*
address*

Date _____

Electoral Registration Officer,
(Address) _____

*To be filled in by the applicant