

APPLICATION FOR THE RIGHT TO INFORMATION ACT,
2005

Date: _____

To
The Public Information Officer,

Postal Address:

Full Name: _____

Mobile No. _____

Particulars of the Information Required:

Period for information required:

Description of the information required:

Information disclosure method (Post / In person): _____

Whether the applicant is below the poverty line: _____

Signature of the Applicant