FORM 'A' FORM OF APPLICATION FOR SEEKING INFORMATION See Rule 5 (1)

		I.D. No	- (For official use)				
То							
		The State Public Information Officer,	•				
1	1.	Name of Applicant	:				
2	2.	Father's name	:				
3	3.	Permanent Address	:				
4	4.	Temporary Address	:				
Ę	5.	Weather a citizen of India : (Please enclose your certified copy of either Sikkim Subject Certificate, Certificate of Identification, Electoral Roll or Passport as proof.)					
6	ô.	Weather affiliated to any : (NGO, Social Organization, Association, Political Organization, etc. If so, the particular of NGO, Organization, Association, Political Organization.)					
7	7.	Concerned Department	:				
		Particulars of information	_				
		(ii) Period of which information	ed (please be specific by giving details) is asked for, ich the Information relates (with specific details)				
8	3.	_	t does not fall within the restriction contained in of my knowledge it pertains to your office.				
g	Э.	A fee of Rs has Authority vide No d	been deposited in the office of the Competent ated				
		Place					
		Place: Date:	Signature of the Applicant				
			Tel. No. (Office)				
			(Residence)				

Note: (i) Please ensure that the Form A is complete in all respects and there is no ambiguity ion providing the details of information required

FORM 'B' ACKNOWLEDGEMENT OF APPLICATION See Rule 5 (1)

I.D. No)	Date:						
1.	Received an application in Form A from Shri/Ms	resident of						
		under Section 5 (1) of the Right to						
	Information Act, 2005.							
2.	The information is proposed to be given normally within 30 days from the day receipt of application and in case it is found that the information asked for cann supplied, the rejection letter shall be issued stating reason thereof.							
3.	3. The applicant is advised to contact the undersigned onbet 11 A.M. to 1 P.M.							
4.	In case the applicant fails to turn up on the scheduled date(s), the Competent Authorishall not be responsible for delay, if any.							
5.	The applicant shall have to deposit the balance fee, if any, with the authorized personal before collection of information.							
6.	. The applicant may also consult Web-site of the department from time to time ascertain the status of his application.							
	Dated	Signature and Stamp of the State Public Information Officer.						
		Address:						

FORM 'C' REJECTION ORDER See Rule 5 (1) (3)

From											
No.			 						Dat	e:	
То											
Sir/Ma	adam,										
addre		to						supply		ed information	on
2.	The	inforn	nation	asked fo	r canno	ot be supp	olied	due to fo	llowir	ng reasons:-	
	(i)										
	(ii)										
3. the La	-				_				-	nay file an appo of this order.	eal to
									You	rs faithfully,	
								State P		Information Of	ficer,

FORM 'D' FORM OF SUPPLY OF INFORMATION TO THE APPLICANT See Rule 5 (1) (D)

From	
No	Date
То	
Sir/M the u	dam, Please refer to your application I.D. No dated addressed to dersigned regarding supply of information on
2.	The information asked for is enclosed for reference.* (i) (ii)
	The requested information about the other aspects cannot be supplied due to following reason:-
	(i) (ii) (iii)
3.	The requested information does not fall within the jurisdiction of this Competent Authority.
4.	As per Section 19 (1) of Right to Information Act, 2005, you may file an appeal to the Law Secretary, Government of Sikkim, within 30 days from the date of issue of this order.
	Yours faithfully,
	State Public Information Officer Address: Tel. No. :

ANNEXURE 'E' See Rule 12

Appeal under Section 19 (1) of the Right to Information Act, 2005

FIC	,,,,,	(Applicant's name and address)					
		(Applicant 3 hame and address)					
То							
		(Name/designation/address of the appellate authority)					
	1.	Full name of the Appellant.					
	2.	Address:					
	3.	Particulars of the State Public Information Officer.					
	4.	Date of receipt of the order Appealed against (if order passed)					
	5.	Last date for filling the appeal:					
	6.	The ground for appeal					
	7.	Particulars of information					
	(i) (ii)	(i) Nature and subject matter of the information required.(ii) Name of the Office or Department to which the following information relates.					
Pla	ice:						
Da	te:	Signature of Appellan					
		Enclosed Bank B.R. No dated for Rs.50/-					

ANNEXURE 'F' See Rule 14.

Appeal under section 19 (3) of the Right to Information Act, 2005

From:				
	(Appe	llant's name and address)		
То				
	(Name	e/designation/address of the appella	ate authority)	
1.	Full na	ame of the Appellant	:	
2.	Addre	SS	:	
3.	Partice Office	ulars of the State Public Information r	:	
4.	Partic	ulars of the First Appellant Authority	<i>ı</i> :	
5.	Date o	of receipt of the order appealed agai	nst :	
6.	Last d	ate for filing the appeal	:	
7.	. The grounds for appeal.		:	
8.	Partico (i)	ulars of information. Nature and subject matter of the Information required	: :	
	(ii)	Name of the Office or Department which the Information relates	to :	
Place:				
Date:				Signature of Appellant
	Encl	osed Bank B.R. No.	dated	for Rs. 100/-