

ANDHRA PRADESH STATE ROAD TRANSPORT CORPORATION

Application form for obtaining JOURNALIST Pass

1. Accreditation No : _____

2. Name of the Applicant : _____

3. Father Name : _____

4. Designation : _____

5. Name Of the Media : _____

6. Working Place : _____

7. Date of Birth (DD/MM/YYYY) : ____ / ____ / ____

8. Gender : Male Female

9. Mobile No : _____

10. Aadhar No (Optional) : _____

11. ID Card No Issued By Employer : _____

12. email ID : _____

13. Address : _____

Latest Photograph with Attestation

I hereby declare that the particulars given above are true and correct. I request to issue Journalist Bus Pass subject to rules and regulations of APSRTC governing in issue of Bus Passes.

Date : _____ **Signature of the Applicant**

Encl: Aadhaar Card Xerox, Accreditation Card Xerox, ID card Issued By Employer Xerox.

For Office Use Only

This is to certify that, the details furnished above by Sri/Smt./Kum. _____

Accreditation No _____ Designation _____ working in _____ media/press

In _____ district issued _____ (state/district) pass .

Token No Issued By DPRO _____.

Station :

Date :

**Signature of the Issuing Authority
With Office Seal**