FORM	**NATIONAL INFORMATICS CENTRE** **GUJARAT STATE** **SSO USER ID FORM** **[For the purpose of accessing Intranet Applications of Govt. of Gujarat]** (Please fill and submit to the nearest NIC office)	

Part A-GEN GENERAL

PERSONAL INFORMATION	**First name**	**Middle name**	**Last name**	**AFFIX PHOTO HERE**

First name | **Middle name** | **Last name**

AFFIX PHOTO HERE

Permanent Address

Present Address

(Please affix your Passport size Photograph)

Date of Birth *(DD/MM/YYYY)*
/   /

Designation

GPF / EIS Number
(For Govt. Staff only)

Sex *(Tick)* ☑
☐ **Male**   ☐ **Female**

Email Address

Employee Category *(Tick)* ☑
☐ State Govt ☐ Cent. Govt. ☐ Board/Corp. ☐ NGO ☐ Private ☐ Others

OFFICE DETAILS

Office Name	
Department Name	
Office Phone Number-1 *(With STD Code)*		**Office Phone Number-2** *(With STD Code)*	
Office Fax Number		**Mobile Number**	
Date of Joining in Service *(DD/MM/YYYY)*	/ /	**Date of Joining in Present Post** *(DD/MM/YYYY)*	/ /

Whether User ID has created for any other application?   *(Tick)* ☑   ☐ **Yes**   ☐ **No**
If yes, please furnish following information :-

(a)	**Login ID :-**
(b)	**Application Name :-**

If No, pls. give Preferred Login ID

(a)	**Option - 1 :**
(b)	**Option - 2 :**
(c)	**Option - 3 :**

Application Name in which access is required :

(a)	
(b)	
(c)	

Declaration

The information furnished above is true to the best of my knowledge and belief. I am solely responsible for the usage of the applications and responsible for any data loss/damage, arising from the usage of the same.

Signature of the User (*With Office Stamp*)	**Signature of the Head of the Office** (*With Office Stamp*)

Part B - OFFICE FOR NIC OFFICE USE ONLY

NIC	1	**User Created on :**	
	2	**User Created by :**	
	3	**Signature :**	