

Post Applied for.....

TO BE FILLED IN BY APPLICANT

1 NAME IN FULL (In Block letters) Passport Size Photograph of applicant

2 PRESENT ADDRESS (For Correspondence) Tel. No (Res) :
(Off) :
Mobile No. :
E-mail :

3 PERMANENT ADDRESS (Home Town) Tel. No (Res) :
(Off) :
Mobile No. :

4 BIRTH DETAILS

Place	Distt	State	Date of Birth	Age.....Yrs (On Next Birthday)
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5 DOMICILE

Name State where you normally reside	Nationality	Mother Tongue
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6 FAMILY DETAILS

Are you Married : Yes / No	No. of Dependents :
Father's/Husband's Name (in full) :	Spouse.....
Occupation :	Children (B)..... (G)..... (Total).....
	Parents.....
	Others.....
	Total.....

7 LANGUAGES

Speak	Read	Write
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8 EDUCATIONAL QUALIFICATIONS

Give details of all the Major Exams, commencing with High School or Equivalent Exam qualified through any board, University (in reverse chronological order)				
Exam or Degree	School, Board, College, University	Division / Percentage	Subjects	Year of Passing

9 KNOWLEDGE OF COMPUTER APPLICATIONS

(a) Name and duration of courses undergone in Computer Application :	
(b) Do you use computer in day to day work :	Yes / No
(c) Your working knowledge in MS Word :	Excellent / V Good / Good
MS Excel :	Excellent / V Good / Good
MS Power point :	Excellent / V Good / Good

10 ACHIEVEMENTS IN EXTRA-CURRICULAR ACTIVITIES

ACTIVITY	LEVEL PARTICIPATED	YEAR OF PARTICIPATION

11 WORK EXPERIENCE

Institution	Period		Position	Reason for Leaving	Total Emoluments
	From	To			

12 HEALTH

13 REFERENCES

Give Names, Addresses, Occupation or position of two responsible individuals who are not related to you, whom reference can be made.	
A	B
Telephone No :	Telephone No :
Mobile No. :	Mobile No. :

14 SALARY What Minimum emoluments do you expect ?

15 JOINING DATE If selected, when can you join

16 ADDITIONAL INFORMATION Write here any additional information you wish to give

17 PAN CARD NO.

18 PASSPORT DETAILS Passport No..... Valid up to

19. Present Monthly Emoluments

- (a) Basic Pay :
- (b) Grade Pay :
- (c) Dearness Allowance :
- (d) H.R.A :
- (e) Conveyance :
- (f) L.T.C :
- (g) Medical :
- (h) Other Benefits :
- i)
- ii)
- iii)

Gross per month :

- 20 a) Have you ever appeared for interview in this Organisation ? Yes / No
(If your answer is yes, please indicate place, post and date of interview and the result thereof)
- b) Have you ever been arrested / convicted by any court ? Yes / No
- c) Is any criminal proceedings pending against you in any court ? Yes / No
- d) Are you a member of a political party ? Yes / No

(If the answer to any of the above is yes, kindly give details)

I hereby declare that all information and particulars given by me in this form are true and correct. If any of the above statements made by me are at any time found to be untrue and / or incomplete or if any information is found to have been suppressed or omitted therefrom by me, I am liable to be disqualified for employment and I accept the Organisation's right to terminate my services without notice or pay in lieu of notice without any other compensation.

Date :

Place :

Signature of Applicant :

(Not to be filled in by the applicant)

NOTES OF INTERVIEWER

Offer Details :-

ORDER

Competent Authority

REMARKS, IF ANY