Last Date of receiving the Application is 8/6/2024 till 05 PM.

FORMAT FOR APPLICATION

			BICI				
1)	Name of the Post						
2)	Name of the Candida						
3)	Date of Birth						
4)	Age						
5)	Category (General/OBC/SC/ST/PH)						
6)	Permanent Address						
7)	Address of Correspondence						
8)	Email Address						
9)	Phone No. MobileLandline No						
10)	Qualification from High School and above						
S. No.	Name of the						
	Board/University		rear of Fassing		Percentage		
11) Experience* S. Post Name of From							
No.	the Institution	From (Date/month/year)	To (Date/Month/ Year)	Total Experience	Duties/I	Duties/Responsibilities	
Relevant documents to be attached.							
I hereby declare that above information provided by me is correct to my knowledge and belief.							
sale medge and benef.							
	(Signature of the Candidate)						
Enclosures attached: -							
	1. 2.						
	3. 4.						