ANNEXURE -I

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Application for the post of

- 1. Name in Full
- 2. Father's/Husband Name
- 3. Permanent Address
- 4. Present Postal Address
- 5. Nationality
- 6. Mobile Number
- 7. Date of Birth

| I | DD | MM | ΥY | | |
|---|----|----|----|--|--|
| | | | | | |

Unmarried

Married

8. Marital Status

9. Category

| GEN | OBC | SC | ST | PH (HH) | EWS | Ex |
|-----|-----|----|----|---------|-----|------------|
| | | | | | | Serviceman |
| | | | | | | |
| Yes | | | | | | |

10. Academic and Professional /Qualification

| Name of the Examination | | Name of the | Year of | % of Marks/Div. | Subject |
|----------------------------|------------|--------------------|---------|-----------------|---------|
| Passed (Exam/Degree) | University | College /Institute | Passing | Obtained | |
| SSC | | | | | |
| HSSC | | | | | |
| Graduation | | | | | |
| Post Graduation | | | | | |
| Professional Qualification | | | | | |
| Any Other | | | | | |

Affix one recent Passport Size Photograph

- 11. Medium of Education
- 12. Employment history in chronological order (starting from current/last employment) and experience (Including training, if any)

| S. | Name of the | Designation | If in Government | Pe | Salary (CTC) | |
|---------|---------------|-------------|------------------|------------|--------------|-----|
| N o. | Organization | | Organization | From | То | Rs. |
| | (Ministry | | /Autonomous | (dd/mm/yy) | (dd/mm/yy) | |
| | /Department | | Body; whether | | | |
| | /Government | | post is held on | | | |
| | Organization | | regular basis or | | | |
| | /Autonomous | | adhoc basis or | | | |
| | Body /Private | | on deputation | | | |
| | Organization | | basis or in | | | |
| | | | private firm | | | |
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13. Total Post Qualification experience (i.e. essential : qualification required for the post applied) in the relevant field (in Months & Years) 14. Nature of Work Handled (Attach separate sheet, if required) 1 i) During Articleship/training • ii) During employment : iii) Skill sets relevant to the profile of the position applied for : 15. Hobbies & Interest : 16. Whether you are presently working or have earlier worked Yes/No : in ERNET India; If yes, then provide the details 17. Whether any of your relative is/was working in ERNET India: : Yes/No If yes then provide Name, Designation and Division in which He/She is/was working 18. Two References (one must be from current employer) 2

- 20. Any medical history /condition that may create challenge in : normal discharge of your duties and which you may require ERNET India to know.
- 21. Additional information, if any which you would you like to : mention in support of your suitability for the post. Enclose a separate sheet, if necessary.

DECLARATION

I, hereby, solemnly declare that all the statement made herein above and documents provided in support of the same are true and correct; to the best of my knowledge and belief. I agree if any information is found to be false then ERNET India may cancel my candidature at any stage (even after selection and joining) and may also initiate suitable necessary legal action can be taken by ERNET India.

Place: _____

Name of the Applicant_____

:

Signature_____

Date: _____