| For office use only: Selection Category: |
|---|
| |

OIL INDIA LIMITED

(A Government of India Enterprise) <u>DULIAJAN</u>

PERSONAL BIO-DATA (CONTRACTUAL ENGAGEMENT)

Recent 3cm x 3cm coloured photograph

| | | gi | iven at the time of Walk- | -in-Intervie |
|--|-----------------------------------|---------------------|--|------------------|
| ner Doctor on contract: | | | | |
| Name in Full (in block let | ters) : | | | |
| Date of Birth (DD/MM/Y | YYY) : | 3. I | Religion : | |
| Gender | : | 5. I | Mother Tongue : | |
| Father's Name | : | | | |
| Mother's Name | : | | | |
| Identification Mark | : | | | |
| Caste (SC/ST/OBC/Ge | en) : | Su | b-Caste : | |
| Do you belong to Non | -Creamy Layer category: | Yes No | (Please put ✓ as applicable |) |
| Do you belong to Eco | nomically Weaker Section | s (EWS) category: | Yes No (Please | put ✓ as app |
| Marital Status | : Married U | nmarried (F | Please put ✓ as applicable) | |
| Name of Spouse, if ma | arried : | | | |
| Other Recognized Category | Ex-Serv : (Mention length of S | | Persons with Benchmark (Mention category & percentage | |
| Details of se illness/operation undergone (if any) | erious : | | | |
| (A) Educational Qualit | fication (acquired as on dat | e): | | |
| Exam Passed | Board/University | , | Percentage of Marks | Year o Passin |
| | | | | |
| | | | | |
| | | | | |
| (B) Other Qualification | n - Licence/Permit etc. (ac | quired as on date): | | |
| <u> </u> | Board/Authority/Institution | <u> </u> | Licence/Permit etc. No. | Valid ti |
| | | | | |
| | | | | |
| | | | | |

Signature of candidate: ____

Date:

*N. B: Self-attested copies enclosed, where applicable

| Designation | | oyer's ne & | Kay Daananaihili | | Dura | ation |
|-------------------------|---|--|----------------------------|-------------|--------------------|--------------------|
| Designation | | | May Daamanaihili | | | |
| | | ress | Key Responsibil | ities Held | From | То |
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| a) Communication/ M | ailing/ Pı | esent Ad | dress: | | | |
| /ill/Town/ Place | | | | | | |
| | | : | | | : | |
| Police Station | | : | | . District | : | |
| State | | | | . Mobile N | lo. : | |
| E-mail ID (in block let | ters) | : | | | | |
| o) Permanent Addres | s: | | | | | |
| /ill/Town/ Place | | | | | | |
| P.O. | | : | | . PIN | : | |
| Police Station | | | | . District | : | |
| State | | | | • | | |
| ddress Proof Certific | ate (Enc | losed): (F | Please put a √ tick | in the box) | | |
| Driving Licence | | V | oter ID Card | | Bank Pass B | ook |
| | | | | | | |
| Indian Passport | | LPG Cyl | inder Issuing Book | | Recent Electric | ity Bill |
| | /ill/Town/ Place P.O. Police Station State E-mail ID (in block let b) Permanent Addres /ill/Town/ Place P.O. Police Station State | /ill/Town/ Place P.O. Police Station State E-mail ID (in block letters) b) Permanent Address: /ill/Town/ Place P.O. Police Station State | /ill/Town/ Place : | P.O. : | /ill/Town/ Place : | /ill/Town/ Place : |

Date:

| 20. | <u>Criminal Cases:</u> (Please put a ✓ tick in the | e appropriate answer) | VEQ | NO |
|-------|--|--|----------|-------------|
| | a) Is there any criminal case pending before | e any Court? | YES | NO |
| | b) Have you ever been arrested? | | | |
| | c) Have you ever been prosecuted? | | | |
| | d) Have you ever been in Jail or Police Custo | ody? | | |
| | e) Have you ever been fined by the Government | nent Authority? | | |
| | f) Have you ever been convicted by a Court | of Law? | | |
| | g) Have you ever been debarred from appear | aring in any examination? | | |
| | h) Have you ever been rusticated by any Ed | ucational authority/Institution? | | |
| 21. | I, Shri/Smt. | | hereby | solemnly |
| | declare that the above information is duly | filled by me and is true to the best of my | knowled | dge. If any |
| | false/incorrect declaration/information has | been made/provided by me herein, | will be | liable for |
| | cancellation/disqualification at any stage of | my contractual engagement and for such | action a | s deemed |
| | fit in this regard. | | | |
| * N.E | 3: Self-attested copies enclosed, where applic | cable | | |
| | | Signature: | | |
| | | Full Name: | | |
| | | Date: | | |