

**For office use only:**  
Selection Category:  
\_\_\_\_\_

# OIL INDIA LIMITED

(A Government of India Enterprise)  
DULIAJAN

Recent 3cm x 3cm  
coloured  
photograph

## PERSONAL BIO-DATA (CONTRACTUAL ENGAGEMENT)

Statement of Shri/Smt. \_\_\_\_\_ given at the time of Walk-in-Practical/Skill Test cum Personal Assessment held on \_\_\_\_\_ for the contractual engagement requirement of \_\_\_\_\_.

1. **Name in Full** (in block letters) : .....
2. **Date of Birth** (DD/MM/YYYY) : ..... 3. **Religion** : .....
4. **Gender** : ..... 5. **Mother Tongue** : .....
6. **Father's Name** : .....
7. **Mother's Name** : .....
8. **Identification Mark** : .....
9. **Caste (SC/ST/OBC/Gen)** : ..... Sub-Caste : .....
10. **Do you belong to Non-Creamy Layer category:** Yes  No  (Please put ✓ as applicable)
11. **Do you belong to Economically Weaker Sections (EWS) category:** Yes  No  (Please put ✓ as applicable)
12. **Marital Status** : Married  Unmarried  (Please put ✓ as applicable)
13. **Name of Spouse, if married** : .....
14. **Other Recognised Category** :

| Ex-Servicemen<br>(Mention length of Service in Defence) | Persons with Benchmark Disability<br>(Mention category & percentage of disability) |
|---|--|
|   |  |

15. **(A) Educational Qualification** (acquired as on date):

| Exam Passed | Board/University/Institute | Percentage of Marks | Year of Passing |
|-------------|----------------------------|---------------------|-----------------|
|             |                            |                     |                 |
|             |                            |                     |                 |
|             |                            |                     |                 |
|             |                            |                     |                 |
|             |                            |                     |                 |

**(B) Other Qualification - Licence/Permit etc.** (acquired as on date):

| Licence/Permit etc. | Board/Authority/Institution | Part/Class etc. | Licence/Permit etc. No. | Valid till |
|---------------------|-----------------------------|-----------------|-------------------------|------------|
|                     |                             |                 |                         |            |
|                     |                             |                 |                         |            |

16. **Work Experience:**

| Designation | Employer's Name & Address | Duration |    |
|-------------|---------------------------|----------|----|
|             |                           | From     | To |
|             |                           |          |    |
|             |                           |          |    |

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

Signature of candidate: \_\_\_\_\_

Date: \_\_\_\_\_

17. **Apprenticeship training, if any:**

| Trade / Discipline | Organization's Name & Address | Duration of Apprenticeship Training |    |
|--------------------|-------------------------------|-------------------------------------|----|
|                    |                               | From                                | To |
|                    |                               |                                     |    |
|                    |                               |                                     |    |

18. **a) Communication/ Mailing/ Present Address:**

Vill/Town/ Place : .....

P.O. : ..... PIN : .....

Police Station : ..... District : .....

State : ..... Contact No. : .....

E-mail ID : .....

**b) Permanent Address:**

Vill/Town/ Place : .....

P.O. : ..... PIN : .....

Police Station : ..... District : .....

State : .....

19. **Address Proof Certificate (Enclosed): (Please put a ✓ tick in the box)**

|                      |                          |                           |                          |                         |                          |
|----------------------|--------------------------|---------------------------|--------------------------|-------------------------|--------------------------|
| Driving Licence      | <input type="checkbox"/> | Voter ID Card             | <input type="checkbox"/> | Bank Pass Book          | <input type="checkbox"/> |
| Indian Passport      | <input type="checkbox"/> | LPG Cylinder Issuing Book | <input type="checkbox"/> | Recent Electricity Bill | <input type="checkbox"/> |
| Recent Landline Bill | <input type="checkbox"/> | Govt. Ration Card         | <input type="checkbox"/> | Aadhaar Card            | <input type="checkbox"/> |

20. **Criminal Cases: (Please put a ✓ tick in the appropriate answer)**

|  | <u>YES</u>               | <u>NO</u>                |
|--|--------------------------|--------------------------|
| a) Is there any criminal case pending before any Court?                    | <input type="checkbox"/> | <input type="checkbox"/> |
| b) Have you ever been arrested?  | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Have you ever been prosecuted?  | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Have you ever been in Jail or Police Custody?                           | <input type="checkbox"/> | <input type="checkbox"/> |
| e) Have you ever been fined by the Government Authority?                   | <input type="checkbox"/> | <input type="checkbox"/> |
| f) Have you ever been convicted by a Court of Law?                         | <input type="checkbox"/> | <input type="checkbox"/> |
| g) Have you ever been debarred from appearing in any examination?          | <input type="checkbox"/> | <input type="checkbox"/> |
| h) Have you ever been rusticated by any Educational authority/Institution? | <input type="checkbox"/> | <input type="checkbox"/> |

21. I, Shri/Smt. \_\_\_\_\_, hereby solemnly declare that the above information is duly filled by me and is true to the best of my knowledge. If any false/incorrect declaration/information has been made/provided by me herein, I will be liable for cancellation/disqualification at any stage of my contractual engagement and for such action as deemed fit in this regard.

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

**Signature:** \_\_\_\_\_  
**Full Name:** \_\_\_\_\_  
**Date:** \_\_\_\_\_