For office use only: Selection Category:



Recent 3cm x 3cm coloured photograph

PERSONAL BIO-DATA (CONTRACTUAL ENGAGEMENT)

Sta	atement of Shri/Sn	nt								(IN BLOCK LE	TTERS) given	
the	time of Walk-in Ir	nterviev	v for	the requ	uireme	ent of					÷	
1.1	Date of Birth (DD/M	IM/YYYY)	:									
2.	Gender : Male / F	- emale	(Ple	ase put ✓	as app	licable)						
3.	Marital Status: Ma	arried /	Unn	narried (Please	put ✓ as ap	oplicable)	4	. Mother	Tongue:		
5.	Father's / Mother	's Nam	e:									
6. ا	dentification Mar	k:										
7.	Caste: GEN	ST		SC	0	BC-NCL	EWS	8. 8	Sub-Cast	:e:		
	GEA		_	 put √as								
9.		(1 10									D: 1:111	
9.	Other Recognized Category		: <u>EWS</u>		(Ment		Servicemen Ition length of ce in Defence)		Persons with Benchmark Disability			
									(Mention category & % age of disability)			
				Yes / No (Put tick here)								
Į				[(Fut tick	nere)							
10.	Permanent Addr	ress:										
	Vill/Town/ Place			:								
	P.O. : PIN									:		
Police Station : District :								:				
State : Mobile No. :												
	E-mail ID (in blo	ck lett	ers)	:								
11	. (A) Relevant Edi	ucatior	al Q	ualifica	tion (acquired:	as on date)	:				
	Exam Passed				•	· ·	/Institute		Percentage of	Year of		
								Marks	Passing			
'.	(D) 041 0 Es			/5								
	(B) Other Qualif	ication	- LIC	cense/P	ermit	etc. (acq	uired as or	i date;):			
	License/Permit etc. Box			/Authori	ity/In	stitution	Part/Clas	s etc	tc. License/Permit etc. No. Valid till			
	<u> </u>		Authori	y/ 1111	Stitution	T di d'Oldo	a. a oraco oto: Ere		chi chini cto. No.	7 411 4111		
						Signatur	e of candid	ate: _				
									Dat	e:		

Designation	Employer's Name	&	Dura	Total						
	Address		From	То	no. of Days					
	1									
I, Shri/Smt					hereby					
solemnly declare that, no criminal case against me pending before any Court/ never been arrested / r										
been prosecuted / never been in Jail or Police Custody / never been fined by the GovernmentAuthor										
never been convicted by a Court of Law / never been debarred from appearing in any examination / r										
been rusticated by a	ny educational authority / Insti	tution a	and the above	information are	e duly filled by m					
are true to the best of	my knowledge. If any false/incor	rectdec	laration/inform	ation has been	made/provided					
herein, I will be liable	for cancellation/disqualification a	at any s	tage of my co	ntractual enga	agement and for					
action as deemed fit i	n this regard									

Full Name:

Date:

- Enclosure:
 1. DOB proof
 2. Category proof
 3. Address proof
 4. Education qualification proof
 5. Work experience certificate
 6. Any other