

For office use only:
Selection Category:



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PERSONAL BIO-DATA
(CONTRACTUAL ENGAGEMENT)

Statement of Shri/Smt. _____ (IN BLOCK LETTERS) given
at the time of Walk-in Interview for the requirement of _____.

1. **Date of Birth** (DD/MM/YYYY):

2. **Gender : Male / Female** (Please put ✓ as applicable)

3. **Marital Status: Married / Unmarried** (Please put ✓ as applicable)

4. **Mother Tongue:**

5. **Father's / Mother's Name:**

6. **Identification Mark:**

7. **Caste:** GEN ST SC OBC-NCL EWS

8. **Sub-Caste:**

(Please put ✓ as applicable)

9. Other Recognized Category	:	<u>EWS</u>	<u>Ex-Servicemen</u> (Mention length of Service in Defence)	<u>Persons with Benchmark Disability</u> (Mention category & % age of disability)
		Yes / No (Put tick here)		

10. Permanent Address:

Vill/Town/ Place :

P.O. : PIN :

Police Station : District :

State : **Mobile No.** :

E-mail ID (in block letters) :

11. (A) Relevant Educational Qualification (acquired as on date):

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

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

License/Permit etc.	Board/Authority/Institution	Part/Class etc.	License/Permit etc. No.	Valid till

Signature of candidate: _____

Date: _____

12.

Work Experience:				
Designation	Employer's Name & Address	Duration		Total no. of Days
		From	To	

13. I, Shri/Smt. _____, hereby solemnly declare that, **no criminal case against me pending before any Court/ never been arrested / never been prosecuted / never been in Jail or Police Custody / never been fined by the Government Authority / never been convicted by a Court of Law / never been debarred from appearing in any examination / never been rusticated by any educational authority / Institution** and the above information are duly filled by me and are 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.

Signature: _____

Full Name: _____

Date: _____

Enclosure:

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