For office use only: Selection Category:



Recent 3cm x 3cm coloured photograph

PERSONAL BIO-DATA (CONTRACTUAL ENGAGEMENT)

Statement of Shri/Smt		(IN BLOCK LETTERS) given		
the time of Walk-in Interviev	v for the requirement of	<u>.</u>		
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 Nam	ne:			
6. Identification Mark:				
7. Caste: GEN ST	SC OBC-NCL EWS 8.	Sub-Caste:		
(Ple				
9.	EWS Ex-Servicemen	Persons with Benchmark Disability		
Other Recognized	: (Mention length of Service in Defence)	(Mention category & % age of disability)		
Category	Yes / No (Put tick here)			
0. Permanent Address:				
Vill/Town/ Place	:			
P.O.	: PI	N :		
Police Station	: Di	strict :		
State	: M	obile No. :		
E-mail ID (in block lett	ers) :			
•	nal Qualification (acquired as on date):			
Exam Passed	Board/University/Institute	Percentage of Year of		
	•	Marks Passing		
(R) Other Qualification	- License/Permit etc. (acquired as on dat	0).		
(b) Other Quantication	- License/Fernin etc. (acquired as on dat	e).		
License/Permit etc. Bo	pard/Authority/Institution Part/Class etc	c. License/Permit etc. No. Valid till		
	Signature of candidate:			
	3	Date:		

Designation	Employer's Name & Address	Name &	Duration		Total
			From	То	no. of Days
I, Shri/Smt					, hereby
•	no criminal case agair	-	•		
<u>-</u>	ver been in Jail or Pol l by a Court of Law / ne	-		-	
been rusticated by ar	y educational authorit	ty / Institution	and the above	information ar	e duly filled by m
	my knowledge. If any fal or cancellation/disqualif				•
action as deemed fit in	•	ication at any	stage of my co	initacidal engi	agement and for
		Signature:			

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