

15. EPF No.

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16. NPS-PRAN No.

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17. Present Address

House No. / Flat No			
Building / Landmark			
Locality			
Village / Town		Dist.	
P.O.		State	
P.S.		PIN	

18. Permanent address

House No. / Flat No			
Building / Landmark			
Locality			
Village / Town		Dist.	
P.O.		State	
P.S.		PIN	

19. Marital status

Married	Unmarried
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If married,

a) Date of marriage	
b) Name of spouse	
c) Date of birth of spouse	
d) Occupation of spouse	

20. Whether any of the family member is working in the Bank

Yes	No
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If yes,

a) Name	
b) Relationship	
c) Designation	
d) Place of posting	

21. Educational qualification

Sl. No.	Examination passed	Name of Institution / Board / University	Year of passing

22. Professional qualification

Sl. No.	Examination passed	Name of Institution / Board / University	Year of passing
1.	JAIIB		
2.	CAIIB		
3.	Others		

23. Area of specialization (banking) (if any)

Sl. No.	Particulars of specialization

24. Co-curricular activities (if any) and Details of participation at Dist. / State / National Level (if any)

(a)	
(b)	

25. Details of training attended so far (if necessary separate sheet may be enclosed)

Sl. No.	Name of the Institution	Name of the Programme	Period of training	
			From	To

26. Preferences in area of interest to work

Sl. No.	Preferences	Areas of work
1.		<ul style="list-style-type: none"> • Marketing, Sales & Operations • Credit & Risk Management • Human Resource Management (HRM) • Finance & Accounts • Information Technology • Law
2.		
3.		
4.		
5.		
6.		

27. Particulars of the Branch / Office where posted since joining in the Bank (if necessary separate sheet may be enclosed)

Sl. No.	Name of the Branch / office	Period of service		Posted as
		From	To	

Date: _____

Signature of Officer / Employee

Place: _____

27. Particulars of the Branch / Office where posted since joining in the Bank (if necessary separate sheet may be enclosed)

Sl. No.	Name of the Branch / office	Period of service		Posted as
		From	To	

28. Dependent list:

SL NO	NAME	RELATION	DATE OF BIRTH	AGE	OCCUPATION	MONTHLY INCOME

Date: _____

Signature of Officer / Employee

Place: _____