**Annexure-II**

**PERSONAL BIO-DATA FORM**

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| Advt. Ref.:  Post Applied for: | | | | Affix recent passport size photograph |
| NAME IN BLOCK LETTERS | |  | | |
| FATHER’S / HUSBAND’S NAME | |  | | |
| ADDRESS FOR COMMUNICATION  Mobile No.:  Landline No.: E-mail Id.: | | | PERMANENT ADDRESS  Mobile No.:  Landline No.: E-mail Id.: | |
| DATE OF BIRTH | PLACE OF BIRTH | | STATE OF DOMICILE | NATIONALITY |
| CATEGORY TO WHICH YOU BELONG TO : (Please tick relevant category)   1. GENERAL 2. SCHEDULED CASTE (SC) 3. SCHEDULED TRIBE (ST) 4. OTHER BACKWARD CLASS (OBC) – Non-Creamy Layer (NCL) 5. PERSON WITH DISABILITY (PwD) 6. EX-SERVICE MAN (ESM) | | | | |
| *Note: Copy of relevant certificate in support to the claim for belonging to Category at Sl.No.2 to Sl.No.6 be enclosed* | | | | |

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| **Educational qualification Details** | | | | | |
| Examination Passed | Year of Passing | Class/ Division | Percentage / CGPA | University/ Institution | Main Subjects of Study |
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| **Essential qualification Details** | | |
| Examination Passed | Year of Passing | University/ Institution |
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| **TRAINING PROGRAMMES, IF ANY, ATTENDED** | | | |
| Title of the Programme | Duration | Name of the Organiser | Main Contents of the Programme |
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| Academic or Professional Awards, Honours, Special Achievements, if any: |

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| **Experience** | | | | | |
| Name and Address of the Organization | Period of Employment | | | Position held | Experience, nature of duties in brief |
| From | To | Duration |
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| If selected, time required for joining: |
| I hereby declare as under:   1. The particulars and facts furnished by me in this Personal Bio-data form are true, correct and complete in all respect. 2. I agree and accept without reservation that at any time, if any of the particulars are found to be untrue, incorrect and/or incomplete, my engagement may be terminated without notice.   Date:  (Signature of Applicant)  Place: |