

<u>BIO DATA FORM</u> (To be filled in by the candidate in his / her own handwriting)

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(Please fill the form in CAPITAL LETTERS ONLY)

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Affix your recent passport size color photo

1. NAME: Mr./ Mrs./Ms. (IN CAPITAL LETTERS)

2. DATE OF BIRTH (as per certificate)	:	// DD MM YYYY	AGE:	_ (as on 29.02.2024)
(a) GENDER	:	Male / Female		
3. ADDRESS FOR COMMUNICATION (With PIN CODE in CAPITAL LETTERS)	:			

4. Telephone No. (With STD Code)	:
a) Mobile No	:
b) E-mail Id	:
5. Religiona) Whether belong to GEN/SC/ST/OBC, Please Specify	: :
b) Whether Physically disabled,	

If Yes, Please Specify

6. FAMILY DETAILS

Relationship	Name	Date of Birth	Education	Occupation

:

7. <u>ACADEMIC DETAILS</u> (in reverse chronological order from 10th onwards): (self-attested Xerox copies of Qualification certificates are to be enclosed)

S.No	Examination Passed	Year of Passing	Full / Part Time	Course Duration	Board / University / Institution	Marks (%)	Specialization/ Stream/ Subject
1							
2							
3							
4							
5							

* Till graduation 10+2+3 format is mandatory. Graduation shall be from a UGC recognized University through regular classroom course.

8. PROFESSIONAL QUALIFICATION:

S.No	Particulars of Professional qualification	Years of Passing	Name of the Institution
1			
2			
3			
4			

9. LANGUAGE PROFICIENCY:

S.No	Language	READ	WRITE	SPEAK
1				
2				
3				
4				

10. <u>OTHER ACHIEVEMENTS</u> (details of competitions won to be given, if any):

S.No	Title	Level	Award / Certificate/ Scholarship Won	Proficiency in Games / Sports	Proficiency in literary work/ art/ culture
1		School			
2		College			
3		University			

11. EMPLOYMENT EXPERIENCE

S.No	Organization	Designation	Nature of Duties	Place	From	То	Salary (CTC - per annum)	Reason for Leaving
1								
2								
3								
4								
5								

*Please attach copy of last drawn pay slip / Experience Certificate / Relieving Order

12. References. (Minimum two contacts)

A.	Name	:
	Designation & Company	:
	Phone Number	:
B.	Name	:
	Designation & Company	:

13. Whether you are known/related to anybody working in any Repco group of Organization (if yes, give details):

Declaration: I hereby declare that the above information are true and correct to the best of my knowledge & belief. In case any of the above information is found incorrect at a later date, I'll abide by the Company decision/disciplinary action taken in that regard.

Place :

Date :

Signature of the Candidate