



APPLICATION FORM FOR MANAGERIAL CADRE/OTHER

Application No.:

(To be filed in by the office)

(Affix your self-attested recent passport size colour photograph)

NOTE :

- i. The application form should be filled in block letters, properly and completely.
- ii. Self-attested copies of all Certificates/Testimonials should be attached with the application form. Originals will have to be shown at the time of the interview if called.
- iii. Weightage of only those documents shall be counted whose self-attested copies are attached.

1. Name of the Post Applied for: _____

Department/Domain : _____

2. Full Name of the Candidate : _____

3. Father's Name : _____

4. Date of Birth : _____ (dd) _____ (mm) _____ (yyyy)

5. Age as on 10.04.2021 : _____ (yy) _____ (mm) _____ (dd)

6. Gender (Male/Female/Trans-gender) : _____

7. Marital Status (Single/Married/Divorced/widow/Widower/Others) : _____

8. Present Address: _____

9. Permanent Address: _____

10. Nationality: _____

11. Aadhar Number: _____

(Photocopy should be enclosed)

12. Whether Person with Disability?

(Write "1" for Yes, "2" for No): _____

13. Contact number : _____

Alternate Contact number: _____

14. Email ID : _____

15. Academic background (Starting from highest to lowest)

S. No.	Name of Board/Institute/ University	Exam Passed	Division / Grade	% of Marks	Year of Passing	Duration of the Degree/Diploma From__ to__	Specialization Subject	Name of School/College/ Institute
1								
2								
3								
4								

Note: Attested copies/Self Attested copies of certificates in support of qualifications must be attached with this application.

16. Category of the Candidate (Attach certificate, if belongs to reserve category):-

- General
 SC
 ST
 OBC
 PWD
Sub Category:
 PWD
 EWS
 Ex-Serviceman

17. Experience (Start from Current Experience)

S. No.	Name of the Organisation	Designation	Pay-Scale (IDA-CDA with GP)	Current CTC	Duration of the post		Total Service
					From	To	
1							
2							
3							
4							

Note: Attested copies/Self Attested copies of certificates in support of qualifications must be attached with this application.

18. Total years of Experience as on 10.04.2021 -

19. Trainings and workshops attended if any:

SN	Topic	Institution/Organization	Duration From__ to__
1			
2			
3			

20. Current CTC

Any other information that the candidate would like to give in support of his/her candidature must be supported with relevant documents.

21. Details of Relative working in FDDI (if any):

S. No.	Name	Designation	Department	Relationship	Contact number

Whether any penalty imposed in any disciplinary proceeding in previous organizations, if YES (please specify)

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Whether under any disciplinary proceeding in current organization, if YES (please specify)

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Declaration:

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge. In case any information being found false or incorrect my candidature shall stand cancelled and all claims of recruitment will stand forfeited. I have informed my Head Office/Department in writing that I am applying for the indicated post.

Place:.....

Date:.....

(Signature of the Candidate)

Note: The candidate may use additional paper (if required).