

APPLICATION FORMAT

To,
The Zonal Manager,
Bank of India, Mumbai North Zone.

Photograph

Sir,

**APPLICATION FOR THE POST OF COUNSELOR AT FLC ON CONTRACT
BASIS IN BANK OF INDIA.**

With reference to your insertion in _____ (Name of the source of information) regarding above, I append below following information for your kind perusal and needful.

| | | |
|----|--|--|
| 1 | Full Name (in Block letters) | |
| 2 | Father's/Husband's Name | |
| 3 | Address (including Telephone/ Mobile No. and e-mail address) where he/ she normally resides/will reside and will perform the duties after selection. | |
| 4 | Name of the Bank and Branch/ Office wherefrom retired | |
| 5 | Complete address of the Bank's HR department where from retired with contact No. | |
| 6 | Personnel No/ PF No/ Personal Identification No. with the previous employer. | |
| 7 | Place and Date of Retirement | |
| 8 | Grade/Scale from which retired | |
| 9 | Name and address of the Bank/ Branch where terminal benefits settled and/ or pension account in existence | |
| 10 | Date of Birth | |
| 11 | Age as on _____ | |

| Post Name | No. of Post | Eligibility Criteria | Working days | Monthly Remuneration |
|----------------|-------------|---|----------------|----------------------------|
| FLCC Counselor | 01 | Graduate/ Post Graduate Degree from UGC recognized University | Weekly 06 Days | Rs. 18,000/- *T&C apply |

Application are invited on prescribed format from Officers retired (on superannuation or VRS with age not more than 64 years as on 30.09.2023) preferably having a background of Rural Credit and branch exposure from Bank Of India, RRBs sponsored by Bank Of India & public sector banks for appointment as Counselor for FLCC Mumbai Suburb on contractual basis for providing free financial literacy/ education and credit counselling to people in rural and urban areas through face to face interaction as well as through other available means like e-mail, mobile, fax etc. The prescribed forms, Eligibility norms and Terms of Employment will be available on banks website www.bankofindia.co.in from 29-09-2023. Filled in applications supported by necessary documents must be submitted by 31-10-2023 at the address given below. -

Financial Inclusion Department, Mumbai North Zonal Office
Opposite – Natraj Market S. V Road, Malad (west), Mumbai-400064 Tel.No -28817323

After preliminary examination of the application forms, eligible candidates will be called for written examination / interview. Please note that Bank of India reserves its right to cancel the notification without any prior information.

Sd/ Zonal
Manager

| | | |
|----|---|--|
| | (should not be more than 62 years) | |
| 12 | Category (Strike off Whichever not applicable) | SC/ ST/ OBC/ GEN |
| 13 | Education Qualification | |
| 14 | Last three assignments prior to the retirement covering minimum 5 years | |
| 15 | Languages known | Can Speak |
| | | Can Write |
| | | Can Read |
| | | Can Understand |
| | Declaration | <p>I hereby declare that: -</p> <ol style="list-style-type: none"> I retired from the <u>Bank of superannuation/ voluntary retirement.</u> No punishment/ penalty was inflicted on me during five years of my service in <u>Bank preceding my retirement</u> VRS. No case of CBI or other law enforcement agency or any proceedings in any court of law is pending against me and I am physically fit to carry out duties of the Channel Management Partner including continuous visits of villages and/ or other places as per requirement of the Bank I have gone through job profile, engagement conditions and remuneration of Channel Partner and is unconditionally acceptable to me. <p>I further declare that the information stated above is complete, true and correct to the best of my information, knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage or my not satisfying any of the Eligibility criteria of Bank of India, my candidature is liable to be cancelled.</p> |
| 17 | Certificate of the employer Bank enclosed: YES/ NO | |

Place.....

Date.....

Signature: _____

Signature of Shri/Smt.....
VERIFIED

(Signature of the authorized Bank Official*)

Bank Branch where proceeds of terminal benefits of the applicant being paid.