|  |
| --- |
| Paste a recent passport sized photograph duly signed across on the photograph |

**APPLICATION FORMAT ANNX 1**

**To,**

**The Zonal Manager**

**Bank of India**

**Baripada Zone.**

**APPLICATION FOR THE POST OF**

**ATTENDANT**

**ON CONTRACT BASIS IN RSETI BARIPADA**

With reference to your insertion in Bank’s Website/ Daily News Paper regarding above, I append below following information for your kind perusal and needful. I also enclose self attested papers/documents related to Proof of Identity/Address/Educational Qualification.

|  |  |  |
| --- | --- | --- |
| 01. | Full Name (in Block letters |  |
| 02. | Father’s / Husband’s Name |  |
| 03. | Address (including telephone/mobile No. and e-mail address) where he/she normally resides/will reside and will perform the duties after selection |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 04. | Date of Birth | | | | | |
| 05. | Age as on 01.06.2024 | | \_\_\_\_\_\_\_\_\_\_\_\_Years \_\_\_\_\_\_\_\_\_\_\_\_ Months | | | |
| 06. | Category (Strike of which is not applicable) | | ST/SC/OBC/GENERAL | | | |
| 07. | Educational Qualification | | | | | |
| 08. | Language known | Can Speak | | Can Write | Can Read | Can Understand |
|  | |  |  |  |
| 09. | Declaration | I hereby declare that:  i) No case of CBI or other law enforcement agency or any proceedings in any court of law is pending against me and  ii) I am physically fit to carry out duties of the Attendant, including continuous visits of villages and/or other places as per requirement of the Bank.  iii) I have gone through job profile, engagement conditions and remuneration of Attendant, and is unconditionally acceptable to me.  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. | | | | |

Place:

Date:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_