

APPLICATION FORM FOR RECRUITMENT ON DEPUTATION BASIS

Leave one space between each word. Fill in CAPITAL LETTERS

Affix signed
passport size
photograph which
should be signed
across

1. POST CODE:		
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[illegible]

3. FULL NAME IN BLOCK LETTERS:

(Leave one space blank between First Name/Middle Name/Last Name) Mr./Ms./Mrs.

[illegible]

4. (a) **FATHER'S/HUSBAND'S NAME:**

[illegible]

(b) OCCUPATION:

[illegible]

5. PERMANENT ADDRESS

PRESENT ADDRESS

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State: _____

State:	
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Pin Code:

Pin Code:

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6. **CONTACT NO :** (with STD Code)

RESI:

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[illegible][illegible]

E-mail: _____

7. **GENDER** (M/ F):

8. **MARITAL STATUS** (Married / Unmarried):

9. **NATIONALITY:**

10. **BLOOD GROUP:**

11. **CATEGORY TO WHICH THE CANDIDATE BELONGS:** (Indicate by tick mark in appropriate box)

(a)

SC	<input type="checkbox"/>	ST	<input type="checkbox"/>	OBC	<input type="checkbox"/>	GEN	<input type="checkbox"/>
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(b) Person with Disability (PWD) - (Y / N): ☐

(c) Ex-Serviceman (Y / N): ☐

12. **DATE OF BIRTH:(DD/MM/YYYY):**

AGE AS ON 30.06.2014 Months Years

Age relaxation claimed (Y / N): ☐

13. **PLACE OF BIRTH:**

Place:
Dist:
State:

14. **PLACE / STATE OF DOMICILE:**

15. **EDUCATIONAL /PROFESSIONAL QUALIFICATIONS**(*in the order of recency*):

Examination Passed	Board / University / Institution	Month & Year		Percentage of Marks Obtained	Division
		From	To		

Working Knowledge of MS Office & Internet (Y/N): ☐

16. PARTICULARS OF EXPERIENCE (in the order of recency)

Name of Employer #	Designation	Period of Service		Length of Service		Nature of duties performed(Attach separate sheet if required)	Remarks (Reason for leaving Service)
		From	To	Years	Months		
Total Experience (in Years and months)						Yrs	months
Experience in the relevant area (as per advertisement (in Years and months)						Yrs	months
<p>➤ Any break in service till 30.06.2014 or gap in employment to be clearly spelled out.</p> <p>➤ Candidates, who are presently employed in Private Sector must annex a copy of the Organization Structure and Pay Scale of the present employment (duly signed by the candidate) to justify their eligibility for a particular post.</p> <p># Last Drawn Gross Salary to be mentioned in case of present employment and salary slip to be annexed.</p>							

17. LANGUAGES KNOWN

Language	Speak	Read	Write

18. MOTHER TONGUE:**19. TOTAL NUMBER OF DEPENDENTS, if any:****20. HAVE YOU EVER BEEN CONVICTED FOR ANY CRIMINAL OFFENCE?(Yes/No)****If yes, give details****21. ADDRESS OF THE POLICE STATION NEAREST TO YOUR PERMANENT AND PRESENT ADDRESS:** (Specify Zone Wise)

Permanent	Present

22. PAN Number:**DECLARATION**

I hereby declare that all the statements made in this application form are true, complete and correct to the best of my knowledge and belief and I am fulfilling the requisite criteria for the post applied.. I understand that in the event of any information being found false or incorrect at any stage or my not satisfying the eligibility criteria according to the requirements, my candidature / appointment on deputation is liable to be cancelled/terminated.

I hereby agree that any legal proceedings in respect of any matter(s) or claims or disputes arising out of this application and/or out of said advertisement can be instituted by me only at Delhi/New Delhi and Courts/Tribunals/Forums at Delhi/New Delhi only shall have sole and exclusive jurisdiction to try any case/dispute. I undertake to abide by all the terms and conditions mentioned in the advertisement given by the Company.

Place:

Signature of Candidate:

Date:

Name of the Candidate:

(To be filled by Organization Concerned)

It is certified that the particulars furnished above have been scrutinized and found to be correct as per official records and that no disciplinary proceedings and Vigilance case are either pending or being contemplated against him/her. It is also certified that the integrity of the candidate is bonafide.

In the event of his/her selection, the candidate will be relieved within 15 days to join on deputation at IIFCL.

Signature and Seal of Forwarding Authority