

BIO – DATA for the Post of : _____

(Below data's are correct as per my information & knowledge AND no more addition / deletion / alteration / modification are required to be done from my side)



Date : _____ (Please fill up in CAPITAL Letters) SOURCE : _____

NAME: _____		E-mail ID: _____		Mob. : _____	
Date of Birth: dd/mm/yyyy	Blood Group	Nationality :	SEX (Pls. Tick)	Male / Female	MARITAL STATUS (Pls. Tick)
		Religion :			Y / N
PAN No	Aadhar	Ex-ESI.No:	EPF No.	EPF UAN.No	
ADDRESS (Present)			NATIVE PLACE (Permanent)		
PIN: _____			PIN: _____		

TEL.No. (With STD)	Mob.No:	PARENT'S DETAILS			Mob.
		Working ⇓	Retired ⇓	Pension If any ⇓	
FATHER / HUSBAND'S NAME (If married) (TEL.No. with STD code & MOB.No.)	AGE	Y / N (Pls. Tick 0)	Y / N (Pls. Tick 0)	Y / N (Pls. Tick 0)	⇓ If 'Y' then Rs. _____
MOTHERS MAIDEN NAME (TEL.No. with STD code & MOB.No.)	AGE	Y / N (Pls. Tick 0)	Y / N (Pls. Tick 0)	Y / N (Pls. Tick 0)	⇓ If 'Y' then Rs. _____

EDUCATIONAL Qualification	Class / Level	Year of Passing / PURSUING / yet to complete	% of Marks obtained	Main Subjects	School / College Name	Medium of Instruction (Eng/Hin/Beng or any other lang) Pls.Specify	Board / University
	XII						
	G (F)						
	PG (F)						
Pursuing							

• WORKING EXPERIENCE IN YEARS \hat{E} Medical Marketing/Customer Relationship : _____ ;NON-Medical Marketing/Customer Relationship: _____

WORK / JOB Experience	SL.No.	YEAR		Name of the Company / Firm	Place of Work Done	Position Held	Office / Field (Pls. Specify)
		Fm MM / YYYY	To MM / YYYY				
		• LAST Salary drawn (CTC) Rs. _____ P.M				• EXPECTED Salary (CTC) Rs. _____ P.M	

- Any Part time / Freelance work for earning money, details if any : _____, Earnings PM Rs. _____
- Attached with Social / Cultural Organisation / NGO's : _____
- Any Outstanding Bank/Personal Loan (taken) OR Pending EMI details if any : _____

FAMILY Parents / Spouse / Children Staying together	NAME	RELATION	DOB	AADHAR NO.	MOBILE NO.

NOMINEE (Name, Address, Relation & DOB)	REFERENCES (Closely known to you)	SL.	NAME	MOBILE NO.

RESIDENTIAL IDENTITY PROOF (Total 2 Nos.)
(Pls. Attach - Any one out of (i) and also from (ii))

i) ELECTRICITY BILL / TELEPHONE BILL / RATION CARD
ii) AADHAR CARD / VOTER ID CARD / PANCARD / DRIVING LICENCE

NOTE : I do hereby confirm, if Selected, then shall work, continuously for atleast 2 (two) years. **SIGNATURE :** _____

For office use only	JOINING DATE : _____	POST : _____	TERMS : _____
	2017	2018	2019