

:2:

09. Professional Qualification (attach attested certificates):

Exam Passed	School/ College	Year	Duration of course		Board/ University	Class/ Divn. % of marks	Subjects	Full time/ Part/ time
			From	To				

10. Experience

Sl. No.	Name of Inst/Organization	Designation	Period		Nature of job	Annual CTC and Annual turnover of employer	Govt./ Pvt.
			From	To			
01							
02							
03							

11. Extra-Curricular activities:

12. Languages known (Speak/Read/Write):

13. References (Non-relatives) with full address

1. _____

2. _____

I hereby declare that the information furnished hereinabove are true and correct to the best of my knowledge and belief.

(Signature of applicant)

Name: _____

Date:

Place: