

**APPLICATION FORM**

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| Post Applied for:  Joke: A/toc/t Bank Dre j | |  | | | Attach a Self Attested Photograph  (3cmx4cm) | | |
| 1. First Name: Last Name: | | | | | | | |
| 2. Date of Birth:  (Certificate of proof to be attached) | | | | | 3. Sex: | | |
| 4. Present Contact Address:  6. Permanent Contact Address: | | | | | 5. Permanent Telephone No:  (STD Code) Number: | | |
| 7. Present Telephone No:  (STD Code)  Office Number: | | |
| 8. Email Address: | |  | | | 9.Mobile No: | | |
| 10. Computer Literacy:  Mention all software(s) known/used | | | | |  | | |
| 11. Education: 1- High School onwards, | | | | | | | |
| Degree | Institute/Board | | Year | Division/Marks (%) | | Subjects | Full/Part Time/Distance Learning |
| Matriculation |  | |  |  | |  |  |
| +2 Arts/Sci/Comm |  | |  |  | |  |  |
| +3 Arts/Sci/Comm |  | |  |  | |  |  |
| P.G.(Specialisation) |  | |  |  | |  |  |
| Professional |  | |  |  | |  |  |
| Others |  | |  |  | |  |  |
| 12. Employment Record: | | | | | | | |
| Total years of post qualification experience: | | | | | | | |
| Years of experience in Government | | | | | | | |

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| 13. Level of Proficiency in Computers | | | |
| MS Office Program | Ability to use | | |
| Poor | Fair | Good |
| MSWORD |  |  |  |
| MS POWER POINT |  |  |  |
| MS EXCEL |  |  |  |
| MS ACCESS |  |  |  |
| Other (Please specify) |  |  |  |

14. Employment History: (Use separate sheets if required)

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| Starting with your present employment, list in reverse order all the employments you have had in the space below: | | | |
| Organization | Designation | Key Responsibilities | Period |
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| 15. Current Employment | |
| Job Description |  |
| Emoluments and other allowance of any |  |

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| 16. Relevant Experience : Please highlight relevant experience possessed by you relating to key respects of the job in the space below : | | |
| Job Component | Organization (Please also provide details of exposure/responsibilities Handled) | Exposure (in months) |
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| 17. **Medical History:** Please give details of major health disabilities (covering congenital disorders, physical or mental disabilities of any sort, cardiac or pulmonary disorders, etc.): | | | | | | | | | |
| 18. **Joining Time:** Please confirm your ability to relocate/be at DMU, Athmallik, Athmallik Forest Division and join within one month of selection. In case of any constraint-please elaborate in the space provided:  In case of already **employed** person(s), NOC **from present employer is to be attached**. | | | | | | | | | |
| 19. **Language Proficiency:** Please confirm oral and written proficiency in languages known to you. Your assessment shall be tested at a later stage): | | | | | | | | | |
| **Language** | **Ability to Converse** | | | **Ability to Read** | | | **Ability to write** | | |
| Poor | Fair | Good | Poor | Fair | Good | Poor | Fair | Good |
| English |  |  |  |  |  |  |  |  |  |
| Hindi |  |  |  |  |  |  |  |  |  |
| Oriya |  |  |  |  |  |  |  |  |  |
| Other (Please specify) |  |  |  |  |  |  |  |  |  |

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| 20. Understanding of Job; Skills, Interests and Experience of Relevance to your Application: Please read the Job Description available at the end of this form and use this page to describe why you are suitable for position. (within 200 words) | | |
| 21. Referees: Two persons to whom you have reported professionally it’s the recent past whom we can immediately approach for a reference | | |
| Referee-1 | | Referee-2 |
| Name: |  |  |
| Address: | |  |
| Telephone:/Cell Number: |  |  |
| Organization: |  |  |
| Designation: |  |  |
| Your Professional Relationship with the Referee: | |  |
| Place:  Date:  Signature of the Applicant | | |