



இந்தியன் வங்கி சுயவேலை வாய்ப்பு பயிற்சி நிறுவனம்
इंडियन बैंक स्वरोजगार प्रशिक्षण संस्थान
INDIAN BANK SELF EMPLOYMENT TRAINING INSTITUTE
(under the aegis of Ministry of Rural Development, Govt of India)
258, Lenin Street , Kuyavarpalayam, Puducherry 605 013
Phone no.0413 2246500 – email indsetipuducherry@gmail.com

APPLICATION FOR ENGAGEMENT AS OFFICE ASSISTANT ON CONTRACT BASIS

Name of the post applied for
(Please tick appropriate Column)

Office Assistant

Please affix
your recent
Photograph

- 1 Name of the Applicant : Mr./Ms./Mrs.
- 2 Name of the Father/Guardian :
- 3 Contact Details:

Particulars	Permanent Address	Communication Address
(i) Door No.		
(ii) Street		
(iii) Village/Locality/Flat		
(iv) Post office		
(v) Taluk		
(vi) District with Pin code		
(vii) Contact Mobile Number and land line		
(viii) Mail ID		

4. Date of Birth(DD/MM/YYYY) :
5. Age :
6. Sex : **Male / Female**
(Please tick appropriate column)
7. Community : **OBC / SC / ST / GENERAL**
(Please tick : appropriate column)
Nationality :

:

8	Educational Qualification :			
	Qualification	Institution	Year of passing	Percentage of marks
9	Computer Proficiency:			
	Qualification	Institution	From	To
	MS Office			
	Tally			
	Other (Please specify)			

10. Typing skills :

Typing	Tamil	English	Others (Please Specify)
Lower Grade			
Upper Grade			

(Please tick appropriate column)

11. Languages known :

Language	Read	Write	Speak
Tamil			
English			
Others (Please Specify)			

(Please tick appropriate column)

12. Previous experience :

Institution	Designation	Nature of Job	From	To

(Enclose experience certificate if any.)

13. **Any other relevant information :**

14. **Pending of any other criminal cases / proceeding :** Yes / No
(Please tick appropriate column)

15. **The attested copies of following certificates to be attached**
(Tick appropriate option as per the qualification requirement for the respective post.)

Particulars	Office Assistant
SSLC	
HSC	
UG- Degree	
PG - Degree	
Computer Proficiency	
Typing Skills	
Experience Certificate	
Community Certificate	

Declaration

I hereby declare that the above information furnished by me is true to the best of my knowledge and belief. If you found the above information as incorrect in future, my candidature / contract may be terminated with immediate effect and the losses occurred can be accounted on me.

Place :

Date :

Signature of The Applicant