## APPLICATION FORMAT (TO BE FILLED IN ENGLISH CAPITAL LETTERS)

| 1. | Name of the Post                                | : | F | PASTE YOUR RECENT        |
|----|---|---|---|--------------------------|
| 2. | Name of the Candidate                           | : |   | PASSPORT SIZE<br>PICTURE |
| 3. | Date of Birth<br>(copy of proof to be enclosed) | : |   |                          |
| 4. | Age as on last date of receipt of application   | : |   |                          |
| 5. | Gender (Male / Female)                          | : |   |                          |
| 6. | Category<br>(General/SC/ST/OBC)                 | : |   |                          |

| 7.  | Father's / Husband's name  | : |  |
|-----|----------------------------|---|--|
| 8.  | Address for Correspondence | : |  |
| 9.  | Permanent Address          | : |  |
| 10. | Aadhar No.                 | : |  |
| 11. | E-mail                     | : |  |
| 12. | Mobile No.                 | : |  |
| 13. | Alternate No.              | : |  |

| 14. Details of Educational Qualification |   |  |  |   |  |  |
|--|---|--|--|---|--|--|
| Institute / College<br>Name              | University / Board                          | Year of<br>Passing   | Major Subjects   | % of<br>marks /<br>CGPA*  |  |  |
|  |   |  |  |   |  |  |
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|  |   |  |  |   |  |  |
|  |   |  |  |   |  |  |
|  | (Matriculation onwar<br>Institute / College | (Matriculation onwards, copy of self-attestedInstitute / CollegeUniversity / Board | (Matriculation onwards, copy of self-attested documents toInstitute / CollegeUniversity / BoardYear of | (Matriculation onwards, copy of self-attested documents to be enclosed)Institute / CollegeUniversity / BoardYear ofMajor Subjects |  |  |

\* Attach CGPA to percentage conversion certificate issued by College/University

|            | 15. Work Experience<br>(copy of self-attested documents to be enclosed) |           |              |         |   |  |                            |  |
|------------|---|-----------|--------------|---------|---|--|----------------------------|--|
| Sr.<br>No. | Employer Name   | Copy of s | From<br>Date | To Date | o be enclose<br>Duration<br>(Years &<br>Months) | d)<br>Gross<br>Annual<br>CTC<br>(in INR) | Brief Job<br>Description # |  |
|            |   |           |              |         |   |  |                            |  |
|            |   |           |              |         |   |  |                            |  |
|            |   |           |              |         |   |  |                            |  |
|            |   |           |              |         |   |  |                            |  |
|            |   |           |              |         |   |  |                            |  |
|            |   |           |              |         |   | 1  |                            |  |

# Attach a separate sheet if required

## DECLARATION

I have carefully gone through the vacancy circular / advertisement, and I solemnly declare and undertake that all the information furnished by me is true, correct, and complete to the best of my knowledge and belief. I undertake that if at any stage of the selection or even after selection, any of the information furnished by me is found to be false, incorrect, or misleading, then my service/engagement will stand cancelled/terminated without assigning me any reason. I will produce the original documents in support of the information furnished whenever required by the employer. I also certify that there is no conflict of interest with any concessionaires/stakeholders/staff associated with NHIPMPL.

Date : \_\_\_\_\_

(Signature of the Candidate)

Place : \_\_\_\_\_

(Name of the Candidate)