

Indian Institute of Management Calcutta

Diamond Harbour Road, Joka, Kolkata – 700 104

PERSONAL DETAILS

[Do not leave the portion unfilled; if not applicable, indicate the same]

[Name and Address should be in Block Letters]

Attested Photograph

Application for	the position			·		
Name		[Last]	[First]			[Middle]
Date of birth	-	[Day]	[Month]		[Month]	
Father's Name/Husband's Name [in case of married women] : Correspondence Address {Please fill up Block Capital Letters}						
Telephone No. with STD Code [Residence]		Telephone No. with Code [Office]	STD	Mobile		E-Mail
Permanent Address {Please fill up Block Capital Letter}						
Sex	Marital Status	Nationality		Religion	F	lome Town and State
Whether SC / ST / OBC / PH [kindly mentioned OH / HH / VH and attach attested copy of certificate] / Ex-Serviceman / General, please specify If SC / ST / OBC, please specify Sub Caste and attach attested copy of certificate issued by the appropriate authority						
		ı	anguac	ge Known		
Language		Read	Write			Speak

Educational / Professional Qualification [Starting from School Final [Class – X] onwards] {Please fill up Block Capital Letters}

Examination	University / Board / Institute [Location]	From	То	Divn. /	Percentage	Specialization	Special achievement
	Institute [Location]			Grade			

Work Experience [Starting from present organization] {Please fill up Block Capital Letters}

[If space is insufficient, please attach separate sheet]

Name & address of Company and nature of business	Position held	Year of From [MM/YY]	f service To MM/YY]	Total experience in years & months	Gross Annual Salary	Major responsibilities

Details of present Salary and Benefits & Scale of Pay/Pay Band & Grade Pay (for Government Employees) [If space is insufficient, please attach separate sheet]
Expected Salary:

	<u>Memb</u>	<u>pership of Professional</u>	<u>Organization</u>	
	Name and Address of	of Organizations		Type of membership
	Extra cur	ricular activities / Hobbi	ies / Sports, etc.	
	<u>Any</u>	other information, plea	ase specify	
FAMILY DETAILS Dependants				
Name	Sex	Date of birth	Relation With applicant	Occupation

REFERENCES

[Please give name, address and telephone numbers [office and residence] of two persons under whom you have worked or have had professional interaction]

SI.No.	Name	Address	Telephone No. and Email-id

NOTE: Furnishing of false information in the case of a candidate selected and employed will be treated as a misconduct

DECLARATION

I certify that the foregoing information is correct and complete to the best of my knowledge and belief.

Date	Signature :