

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 to	r the position			·				
Name		[Last]	[First]			[Middle]		
Date of birth	-	[Day]	[Month]		[Month]			Year]
Eathar's Nam	o/Husband's Man	ne [in case of married wo	omon1					
		ase fill up Block Capital						
COLLESPORA	ice Address (Fie	ase iiii up biock capital	<u>Letters)</u>					
Telephone No. with STD Telephone No. with S		STD	D Mobile		E-Mail			
Code [R	Code [Residence] Code [Office]							
Permanent Address {Please fill up Block Capital Letter}								
Sex	Marital Status	Nationality		Religion		Home Town and State		
OCA	Maritai Otatas	reationality	i toligion		ionic rown and otate			
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								
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		<u> </u>	_anguag	<u>je Known</u>				
Lan	Language Read			Write		Speak		
1								

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

Examination	University / Board /	From	To	Divn. /	Percentage	Specialization	Special achievement
	University / Board / Institute [Location]			Grade	3 3 3 3		

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

[If space is insufficient, please attach separate sheet]

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Name & address of	Position held	Year o	f service	Total experience	Gross Annual	Major responsibilities
Company and nature of		From	<u>To</u>	in years &	Salary	
business		[MM/YY]	MM/YY]	months	J ,	
basiness		1141141/1111	141141/ 1 1]	months		

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>Mem</u>	bership of Professional	<u>Organization</u>	
	Name and Address	of Organizations		Type of membership
	Extra cu	rricular activities / Hobbi	es / Sports, etc.	
	<u>An</u>	y other information, plea	se specify	
		FAMILY DETAIL Dependants	S	
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]

Sl.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 :