THE NAINITAL BANK LIMITED (Regd. Office: G.B. Pant Road, Nainital)

Application for the post of						
To, The Vice President (HRM) The Nainital Bank Limited Head Office Seven Oaks, Mallital, Nainital- 263 001		PHO	UR SSPO OTOG	RT BRAPI ROSS	Н	CENT SIZE AND
Dear Sir,						
In response to your advertisement, I, hereby, submit my candidature for th	e pos	t of			_	
FULL NAME IN BLOCK LETTERS (Leave one Box blank between two parts of your name)-Mr./Ms./Mrs.					.	
			+	+		
2. FATHER'S NAME: (Leave one Box blank between two parts)-Mr. 3. DATE OF BIRTH: DD MM YY (Proof to be submitted along with application i.e. Xth certificate)						
Age as on 30.06.2022: Years Months Days 4. ADDRESS FOR CORRESPONDENCE: (Leave one box blank between	two r	orto	o of v	vour	· adv	drocc)
IN CAPITAL LETTERS	i two p	Jane	3 OI)	youi	auc	
			\perp	\perp	-	
			+	+	+	
STATE PINCO	DE					
5. CONTACT INFORMATION:						
STD CODE TELEPHONE NO. MOBILE NO. EMAIL ID*						

^{*}legible valid e-mail ID is compulsory.

Examination Passed		Name Unive				:e		ubje stud				ar o	g	Mari Obta Out	aine	ed/	%d Ma	of arks	;
High School														Out	<u> </u>				
Intermediate																			
Graduation (if a	ny)																		
Post-Graduation	ı (if																		
any) Professional																			
Qualification, al	ong																		
with specializati																			
Certification																			
Others																			
							on) [)ota	ils a	as o	n 30	0.06.	202	2 (P	leas	se e	nclo	se (CO
of relevant Certi	ficates)):					-				by :	you.							
8. Experience (of relevant Certi Give details/ atta	ficates) ach doo Desig	: cumen ination	ts of	eac Dur	h as	signi	ment Key	und	erta	ken os/		Rea		ıs fo		Ann			
of relevant Certing Give details/ attained at the Organization/	ficates) ach doo	: cumen ination	ts of	eac Dur Pro	h as atio	signi n of ion/	ment Key Res	und Poi	erta tfolio sibil	ken				s fo		Inco	me/		
of relevant Certi Give details/ atta Name of the	ficates) ach doo Desig	: cumen ination	ts of	eac Dur Pro	h as	signi n of ion/	ment Key	und Poi	erta tfolio sibil	ken os/		Rea		s fo		Inco Sala		if in	

6. **PERMANENT ADDRESS** (Leave one box blank between two parts of your address)

1		Designation & Name of the Organization	Pr	esent Address	Mobile N mail Id	Mobile Number & e- mail Id			
10. Prefer SI No.		cation for posting		Diago number	4.4 in audau	of mustavanas			
	Location			Please number	1-4 in order c	or preference			
<u>1.</u> 2.	Haldwani Dehradun								
<u>2.</u> 3.	Noida								
<u>3.</u> 4.	Lucknow								
4. 5	Nainital								
12. ANY C	THER ADD	DITIONAL INFORMATION	ON:			1,500.00			
belief. Not I am awai terminated	hing materia re, that in c d / dismisse	ne information furnished al has been concealed r case, any of the informa d immediately from Ban bject to other conseque	I her nor a ation ik's s	any thing containe is found false si service without an	d heretofore is ubsequently, I	s false in any man shall be liable to			
Lalso und		at if I do not fulfill the e eject my application, with							
	•								
shall be at	•	rstood terms & condition	ns in	the advertisemen	t given by the	Bank.			

Important:

*Please ensure to fill your valid e-mail ID at Point No. 5 which is compulsory, failing which application shall be rejected straightway.

Incomplete application in any manner that is to say- application not filled properly, without Photograph, Signature, Proofs of Date of Birth and Educational Qualification/ Professional Qualification, Experience, without valid e-mail ID, Phone/ mobile number, application fee, etc., and received after expiry of stipulated date, the same shall be rejected at the sole responsibility of the candidate.