



INDIA INFRASTRUCTURE FINANCE COMPANY LIMITED
(A Government of India Enterprise)

APPLICATION FORM

Affix passport size
colored photograph
which should be
signed across

Leave one space between each word. Fill in CAPITAL LETTERS

1 POST CODE

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2 STREAM APPLIED

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3 FULL NAME IN BLOCK LETTERS

(Leave one space blank between First Name/Middle Name/Last Name) Mr./Ms./Mrs.

4 (a) FATHER'S / HUSBAND'S NAME

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5 GENDER Write M for Male and F for Female

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6 DATE OF BIRTH

DATE

MONTH

YEAR

7 AGE (as on cut-off date)

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YEARS

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MONTHS

8 CATEGORY (Indicate by tick mark in appropriate box)

(a)

UR	
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SC	
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ST	
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OBC	
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EWS	
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(b) **Person with Disability (PWD) - (Y / N):**

PH(PWD) Category **WRITE OH** for Orthopaedically Handicapped,

HI for Hearing Impaired and **VH** for Visually Handicapped in
addition to the main Category in (a) above (Others leave it Blank)

(c) **Ex-Serviceman - (Y / N):**

9 MARITAL STATUS (Married / Unmarried):

10 NATIONALITY

11 BLOOD GROUP

12 PLACE OF BIRTH
PLACE

 DISTT.

 STATE

13 PLACE / STATE OF DOMICILE

14 EDUCATIONAL / PROFESSIONAL QUALIFICATIONS
(Starting from Class 10th onwards)

Please attach a separate sheet if required

Examination passed	Discipline/ specialization /subject	Board / University / Institution	Year of passing	Percentage of marks	Division

15 EXPERIENCE (as on cut-off date) (Recent First)

Please attach a separate sheet if required

Name of Employer	Designation	Period of Service		Nature of duties performed	Reason for leaving Service	Achievements
		From	To			

TOTAL EXPERIENCE: _____ Years _____ Months

16 MOTHER TONGUE**17 LANGUAGES KNOWN**

Language	Speak	Read	Write

18 TOTAL NO. OF DEPENDENTS, if any**19 CONTACT DETAILS**Residence: STD Code Tel. No. Office: STD Code Tel. No. Mobile No.

Email ID:

20 PRESENT ADDRESS

District			State			
PIN						

21 PERMANENT ADDRESS

District			State			
PIN						

22 ADDRESS OF THE POLICE STATION NEAREST TO YOUR PERMANENT AND PRESENT ADDRESS

Present	Permanent

23 Have you ever been convicted for any criminal offence?(Yes/No)

If yes, give details

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24 PAN No.

25 AADHAR No.

DECLARATION

I hereby declare that all the statements made in this Application Form are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage or my not satisfying the eligibility criteria according to the requirements, my candidature / appointment is liable to be cancelled/terminated. I have read and understood the stipulations given in the advertisement and hereby undertake to abide by them

I hereby agree that any legal proceedings in respect of any matter(s) or claims or disputes arising out of this application and/or out of said advertisement can be instituted by me only at Delhi/New Delhi and Courts/Tribunals/Forums at Delhi/New Delhi only shall have sole and exclusive jurisdiction to try any cause/dispute. I undertake to abide by all the terms and conditions mentioned in the advertisement given by the Company.

PLACE:

SIGNATURE OF THE APPLICANT

DATE:

NAME:_____

-X-X-X-