

STATE BANK OF INDIA

APPLICATION FOR CONSULTANTS

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APPLICATION CODE	
(For application codes, refer table1 in the information brochure):	

1.	Full Name (In block letters)	:	
2.	Present address for communication (In block letters)		
	Address Line 1	:	
	Address Line 2	:	
	City	:	
	State	:	
	Pin code	:	
	Mobile No.	:	
	Landline No. (With STD Code)	:	
	Email Id	:	
3.	Date of Birth (DD-MM-YYYY)	:	
	Age as on 31.03.2020	:	
4.	Nationality	:	
5.	Father's / Husband's Name	:	

6. Academic / Professional Qualifications (Self attested copies of certificates to be enclosed):

Note: For Academic, mention only graduation & above

#	Degree / Course	Name of University / Institution
a.		
b.		
c.		
d.		
e.		
f.		
g.		
h.		

7.	Total work experience in years	:	
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Note - The details of the work experience are to be enclosed in the following format in separate sheet(s) along with this application form. Also enclose the relevant supporting documents (self attested) pertaining to the work experience.

From Year	To Year	Name of the Organization	Position(s) Held	Details of Assignment

8. Other Professional Engagements, if any

Note - The details of Other Professional Engagements, if any, are to be enclosed in the following format in separate sheet(s) along with this application form. Also enclose the relevant supporting documents (self attested).

	Name of the Company / Body / Committee	Period	Brief role description & work done
Directorship in any companies			
Membership of any Professional Bodies/ Committees			

9. Particulars of papers, if any, published/ presented in professional forum

Note - The details, if any, are to be enclosed in the following format in separate sheet(s) along with this application form. Also enclose the relevant supporting documents (self attested).

Forum	Date / Period	Topic

10. Assignment(s) similar to the one applied for, if any, already engaged in

Note - The details, if any, are to be enclosed in the following format in separate sheet(s) along with this application form. Also enclose the relevant supporting documents (self attested).

Name of Institution/Company	Nature of Assignment

11. References (Provide 2 references)

	Reference 1	Reference 2
Name		
Organization		
Designation		
Complete Address for Communication		
Mobile No.		
Landline No. (With STD Code)		
Email Id		

DECLARATION - I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage or my not satisfying any of the eligibility criteria according to requirements laid down, my candidature/assignment is liable to be cancelled.

Place:

Signature:

Date:

Name of the Candidate: