

(Bring this Bio-Data- cum- attestation form duly filled in and submit at the time of document verification)



**THE DIST. CO-OPERATIVE CENTRAL BANK LTD.,  
NO.M210, SRIKAKULAM**

Address : Collector Bungalow Road, Dandiveedi, Srikakulam-532001  
PHONE : 222301, 228297; FAX: - 08942-223409  
Email : [ceo\\_sklm@apcob.org](mailto:ceo_sklm@apcob.org), [ceo@dccb-srikakulam.org](mailto:ceo@dccb-srikakulam.org)  
Website : [www.dccb-srikakulam.org](http://www.dccb-srikakulam.org)  
GST : 37AAEAT8853D1Z7



**International Year  
of Cooperatives**  
Cooperatives Build a Better World

**PLEASE FILL THE FOLLOWING INFORMATION IN BLOCK LETTERS**

**1. ROLL NO.:** \_\_\_\_\_

**2. FULL NAME**(as per SSC Certificate)  
Mr./Ms./Mrs. \_\_\_\_\_

PLEASE PASTE A  
RECENTPHOTOG  
RAPH AND SIGN  
ACROSS  
INFULL(PASSPO  
RT SIZE)

**3. ADDRESS FOR CORRESPONDENCE:**

CITY	PIN
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Cell No.: \_\_\_\_\_ e-mail id: \_\_\_\_\_

**4.DATE OF BIRTH:**

(As per proof of)

DD   MM   YYYY

**5.GENDER:**

(indicate by\_/mark in appropriate box)

MALE ☐

FEMALE ☐

**6. MARITAL STATUS:** \_\_\_\_\_

**7. WHETHER CANDIDATE ACQUIRED  
PROFICIENCY IN TELUGU & KNOWLEDGE OF ENGLISH**

**YES/NO**

**8. (a) DETAILS OF EDUCATIONAL QUALIFICATIONS:**

Qualification	University/Institute/ Board	Year of Passing	Division n/ Class	Marks in%*	Subjects studied
Classes X IX					SSC/CBSE/ICES
Intermediate or equivalent					
Graduation					
Post - Graduation					

**11(b) ADDITIONAL QUALIFICATIONS , if any:**

Name of the Course	University/Institute	Duration of Course	Division /Class/ Grade	Mark s %	Subjects covered

*\*The percentage of marks in graduation shall be arrived at by dividing the aggregate/total marks obtained by the candidate in all subjects, **as graded by the concerned University/Board**, with the aggregate maximum marks of the examination passed for all the years of the examination.*

**9. DETAILS OF EXPERIENCE, if any:**

Organisation	Post held	Nature of job	Period of service (Dates)		No. of completed years of service
			From	To	
Total period of experience (in years)					

**DECLARATION**

I hereby declare that all the statements made in this application are true and if any of the particulars furnished by me are found to be incorrect or suppressed, my candidature is liable to be rejected at any stage of the selection process. Even though it is found after my appointment in DCCB, Srikakulam that the particulars furnished by me are incorrect or have been suppressed, my services are liable to be terminated without any notice.

**PLACE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF CANDIDATE

\_\_\_\_\_  
NAME OF THE CANDIDATE