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Institute for Development & Research in Banking Technology

Castle Hills, Road No.1, Masab Tank, Hyderabad - 500057

Please affix a recent passport size photograph

Post Applied for: Driver-cum-Office Attendant Advt. No.: 06 / 2024-25

1. Name in Full : _____

2. Gender: Male ☐ Female ☐ 2 (a). Marital Status: Married ☐ Single ☐

3. Father's Name: _____

4. Present Address: _____

_____

5. Permanent Address: _____

_____

6. Residential Phone No : _____

7. Mobile Phone No : _____

8. Email-ID : _____

10. Date of Birth ☐☐☐☐☐☐☐☐ (as in Matriculation Marksheet / Certificate)

11. Age as on 31.07.2024 ☐☐ (Years) ☐☐ (Months) ☐☐ (Days)

12. Indicate your Category SC ☐ ST ☐ OBC ☐ GEN ☐

13. Details of Academic Qualifications commencing from Matriculation onwards:

S.No	Name of the Examination	Board / University/ Institute	% of Marks	Year of Passing

14. Details of Other Qualifications, if any:

S. No	Name of the Examination	Board / University/ Institute	% of Marks	Year of Passing

15. Driving Licence Details

(i) Light Motor Vehicle (LMV) Licence No. __ _____ granted on _____

16. Experience as on July 31, 2024 (starting from present position):

S.No	Name of the Employer	No. of Years served	Period		Designation	Job Profile In Detail (Attach Separate Sheet if required)
			From	To		
Total Years of Relevant Experience						

17.	Names and addresses of three Referees (at least one of them should be familiar with your work)		
Name :			
Occupation or Position:			
Address			
Phone No:			
Email ID:			

18. Any other information that you would like to provide in support of your candidature:

_____

_____

19. Please attach scanned copies of the following documents and tick "YES" or "NO" against each one of the following, indicating the document has been attached:

i.	Matriculation Marksheet / Certificate: (stating Date of Birth)	Yes ☐ No ☐
ii.	12th Standard Marksheet / Certificate:	Yes ☐ No ☐
iii.	Caste Certificate (if applicable):	Yes ☐ No ☐
iv.	Ex-Serviceman Experience Certificate (if applicable):	Yes ☐ No ☐
v.	Light Motor Driving Licence (Valid Upto:_____)	Yes ☐ No ☐

Declaration

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that if at any stage, it is found that any information given in this application is false / incorrect or that I do not satisfy the eligibility criteria according to the Institute, 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.

Place:

Date:

Signature of the Applicant: _____

Name of the Applicant: _____

The duly filled-in Application Form may be scanned and sent by email to: careers@idrbt.ac.in so as to reach the Institute latest by August 14, 2024. Please indicate "Application for Driver-cum-Office Attendant" in the subject line of the e-mail.