



CANBANK FACTORS LTD.

(A Subsidiary of Canara Bank)

Reg. Office: #67/1, Kanakapura Main Road (Near Lalbagh West Gate)
Basavanagudi, Bengaluru - 560 004.
Tel No: 080-22420237, 38, 39 Fax: 080-22420240, CIN: U85110KA1991PLC011960
E-mail: canfact.bgl@canbankfactors.com Website: www.canbankfactors.com

Affix recent
passport size
photograph and
sign across on
it.

BIO-DATA FORM FOR INTERVIEW

FOR THE POST OF _____

[To be filled in by the candidate in his/her own handwriting and submit 1 original + 3 xerox copies. Please read the instructions carefully before filling up this form]

1	Application No.			
2	Name in full (BLOCK Letters)			
3	Date of Birth	Date	Month	Year
		<input type="text"/>	<input type="text"/>	<input type="text"/>
	Age as on 31.01.2019	Years	Months	Days
		<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Place of Birth			
5	Native Place		Taluk :	District:
			State:	
6	Father's name			
7	Mother's name			
8	Spouse name if married			
9	Nationality		Religion :	
10	a) Permanent Address [in block letters]		b) Communication Address [in block letters]	
	Pin:		Pin:	
	Phone	Res:	Phone	Res:
	Cell		Cell	
	E-mail:		E-mail:	
11	Marital Status : Single /Married / Widowed / Divorced / Legally Separated : (If Married, name of the spouse, occupation & Annual Income)			
12	State the number of persons, who are dependent on you for support : [parents, wife/Husband, Children, Brothers/Sisters, Others]			

13	Educational Qualification:							
	Certificate/Degree/ Diploma obtained [Specify the course]	School/College / University / Board	Date of passing [dd/mm/yy]	Principal & Optional subjects studied in brief	No. of attempts	%age of marks obtained	Class & Rank obtained	Prizes Rank if any
	SSLC / SSC							
	Pre-University / Intermediate							
	Graduation							
	PG							
	JAIIB/ CAIIB							
	CA / ICWAI/CS							
14	If already employed, details of previous experience / present employment (Start with present employment)							
	From (dd/mm/yy)	To (dd/mm/yy)	Name of the employer		Designation	Nature of appointment		Salary per month
15	Please furnish Name, Occupation and address of TWO respectable persons, NOT related to you, to be given as reference							
	1) Name:			2) Name:				
	Occupation:			Occupation:				
	Address:			Address:				
	MOB NO:		Pin:		MOB NO:		Pin:	
16	Additional information if any, which you wish to furnish.							
The following are to be enclosed in the same order								
A	SELF ATTESTED COPIES OF : (1 SET ONLY)							
a)	Proof of Date of Birth [SSC / SSLC / X Std. Certificate with DOB or Birth Certificate]							
b)	Mark lists from SSC / SSLC, Graduation, Post Graduation etc passed by you, membership with Bar Council of India including technical and professional exams of each year / semester, if any.							
c)	Certificate regarding graduation/post-graduation/MBA /other examinations passed.							
d)	Original Call Letter for Interview and Identity Proof as mentioned in call letter.							
e)	Experience or Service Certificate/s from the employer/s regarding present and previous employment							
f)	Testimonials regarding proficiency in Curricular/Extra-curricular activities, if any.							
g)	Caste certificate in the prescribed format as stipulated by Government of India							
	Note: Wherever photocopies are submitted, the originals of the same should be produced for verification. If there is any information available on the backside of the document, the same also should be copied and submitted.							

B	ORIGINAL CERTIFICATES :	
1)	No objection certificate from the employer in case of candidates presently working.	
<p>I _____ hereby declare that the above statements are true, complete and correct and also that no facts have been suppressed. It is understood that employment, if any, offered to me is based upon the truthfulness of the statements made herein & in application and in the event of any information being found false or incorrect at a later date, my appointment is liable to be terminated. I further state that, if selected, I am willing to be posted to anywhere in India, at any of the branch/office including rural branches of the Company.</p>		
DATE :		SIGNATURE OF THE CANDIDATE
PLACE :		
FOR OFFICE USE		
Certificates Scrutinized by :		
Name :		
Designation :		
Office Address :		
Date :		Signature

