# RESERVE BANK OF INDIA SERVICES BOARD, MUMBAI
## APPLICATION FOR THE POST OF OFFICER IN Gr. 'B' (DR)

Advt. No. 1A/2009-10

**RECEIPT NO.**

**FEE PAID**

( For Office use only)

**1. NAME IN FULL (IN ENGLISH WITH CAPITAL LETTERS) :**

_____

**2. CATEGORY:**

**A.** Indicate the category to which you belong by marking [ √ ] in the appropriate box
(OBC candidates coming under 'Creamy Layer' should indicate their category as [UR] )

UR | OBC | SC | ST

**B.** IF PHYSICALLY HANDICAPPED, TICK THE APPROPRIATE BOX
(Tick [OH] for Orthopaedically Handicapped: [HI] for Hearing Impaired and VH for Visually Handicapped)

OH | HI | VH

**3.**

| EXAMINATION CENTRE | CODE | |
|---|---|---|
| | | |

**Paste a signed Latest Passport size Photograph**

**4. SEX: WRITE [M] FOR MALE AND [F] FOR FEMALE:**

**5. DATE OF BIRTH:**

Date | Month | Year

**6. AGE (AS ON 01-07-2009):**

_____ **Years** _____ **Months**

**7. A. ACADEMIC QUALIFICATIONS ( AS ON 01-07-2009)**
(Starting with minimum qualification stipulated for the post)

| Name of the Exam. (Please specify) | Main subjects | Date of Result | University/Institute | Overall % of marks (up to two dec. points) | Class / Division |
|---|---|---|---|---|---|
| Graduation | | | | | |
| Post Graduation | | | | | |

**B. HIGHER QUALIFICATIONS (AS ON 01/07/2009) :**
(Write in the box whether M.Phil./Ph.D./C.A./ICWA/ACS/PG Dip. in Management from IIM only))

**8. DO YOU FALL UNDER EX-SERVICEMAN/DOMICILED IN J. & K./RETRENCHED FROM GOVT. OFFICE/BANKING INSTITUTION ?**
**WRITE [Y] FOR YES [N] FOR NO**

**9. EXPERIENCE WITH REFERENCE TO THE ADVERTISEMENT (AS ON 01/07/2009):**

| Name and address of the employer | Designation | Job profile | Period | | Duration | |
|---|---|---|---|---|---|---|
| | | | From | To | Yrs | Mths |
| | | | | | | |

**10. PARTICULARS OF EXAMINATION FEE:**

| Name of the Drawee Bank/Post Office | No. and date of D D/ Indian Postal Order/s | Amount Rs. |
|---|---|---|
| | | |

**11. DID YOU APPLY 4 TIMES IN THE PAST FOR THE POST OF OFFICER GR.'B' ? WRITE (Y) FOR YES AND (N) FOR NO**
(Applicable only to Unreserved Category Candidates)

**12. POSTAL ADDRESS (IN ENGLISH AND IN CAPITAL LETTERS - DO NOT WRITE NAME)**

**STATE:** **PIN:**
**email address if any**
**Telephone No (with STD) if any**

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 Board, 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 :

_____
(Signature of the Applicant)

DATE : Name :

Very important points to be noted by the candidates : (i) Candidates must complete the application in all respects including Pasting of photograph. (ii) Incomplete applications in any respect will be rejected and no correspondence will be entertained by the Board in this matter.