



Annex I

**Application Form**

**Application for Engagement as Pharmacist on Contract Basis with Fixed Hourly Remuneration**

**Reserve Bank of India, Patna**

Affix recent Self-  
Attested Passport  
size photograph

1.	Name in full Shri / Smt. / Kum. (in block letters)					
2.	Father / Husband's Name:					
3.	(a) Residential Address:					
	(b) Phone No.:	Landline:	Mobile:			
	(c) Email ID:					
4.	(i) Date of Birth (in DD-MM-YYYY Format) Age on September 01, 2023	Date of Birth: Age: <input type="text"/> years <input type="text"/> months <input type="text"/> days				
	5.	Place of Birth and Domicile				
6.	Category-Tick (✓) the appropriate box	<b>SC</b>	<b>ST</b>	<b>OBC</b>	<b>EWS</b>	<b>GEN</b>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Nationality:					

8.	Educational Qualifications			
	Degree/ Diploma	Year of Passing	University/ Board	Percentage
a)				
b)				
c)				
d)				
9.	Particulars of any other course in medicine completed by the applicant			
	Course Name	Institute		Year of Completion
a)				
b)				
10.	Details of experience (Only Experience gained after diploma/graduation should be stated)			
	Experience	Name of Organization/Clinic/Hospital		Period of Engagement (From and to)
a)	As Pharmacist in Hospital			
b)	As Pharmacist PSBs/PSUs/Govt. Hospital			
c)	As General Pharmacist			
11.	Any other factors which the applicant would like to bring into cognizance of the Bank for considering his/her application.			

I hereby declare that the information and particulars given by me in this form are true and correct. 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 Bank, my candidature/ appointment is liable to be cancelled/ terminated without notice or compensation in lieu of notice. I have read and understand the stipulations given in the advertisement and hereby undertake to abide by them.

(Signature of the applicant)

Place:

Date:

### **Instructions**

1. All the details in the Application Form are to be filled up completely by the applicant, as incomplete Form is liable to be rejected.
2. Self-attested copies of relevant certificates regarding age, educational qualifications, experience certificate, caste Certificate, copy of registration certificate issued by Bihar State Pharmacy Council etc. should be attached/enclosed with the application. Candidate must complete the application in all respects including pasting of photograph.
3. If the candidate is working as a Pharmacist for any institution, the details thereof and working hours therein should be indicated.
4. Incomplete application in any respect will be rejected and no correspondence will be entertained by the Bank in this matter.