

INDIA INFRASTRUCTURE FINANCE COMPANY LIMITED

(A Government of India Enterprise)

APPLICATION FORM

Affix passport size colored photograph which should be signed across Leave one space between each word. Fill in CAPITAL LETTERS 1 POST CODE POST APPLIED **FULL NAME IN BLOCK LETTERS** (Leave one space blank between First Name/Middle Name/Last Name) Mr. /Ms. /Mrs. (a) FATHER'S / HUSBAND'S NAME Write M for Male and F for Female GENDER **DATE MONTH** YEAR DATE OF BIRTH AGE (AS ON 01.01.2025) **YEARS MONTHS**

8	8 CATEGORY (Indicate by tick mark in appropriate box)							
	(a)	UR SC	ST	7	OBC	EWS		
	(b) Person with Disability (PWD) - (Y/N):							
	PH(PWD) Category WRITE VI for Visually Impaired, HI for Hearing Impaired, LD for Locomotor Disability, ID for Intellectual Disability and MD for Multiple Disabilities in addition to the main Category in (a) above (Others leave it Blank)							
	(c) Ex-Serviceman - (Y/N):							
9	9 MARITAL STATUS (Married / Unmarried):							
10	10 NATIONALITY							
11	11 BLOOD GROUP							
12	12 PLACE OF BIRTH							
	PLACE DISTT. STATE							
13	13 PLACE/STATE OF DOMICILE							
14	14 EDUCATIONAL/PROFESSIONAL QUALIFICATIONS							
(Starting from Class 10th onwards)								
Please attach a separate sheet if required								
Exa	Examination Discipline/ Board/ Year of Percentage Division							
	passed	specialization	University/	passing	of marks			
		/subject	Institution					

15 EXPERIENCE	(Recent First)
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Please attach a separate sheet if required

Name of Employer		Designation	Period of Service		Nature of	Reason	Achievements	
			From	То	dutiesperformed	for leaving		
						Service		
TO	OTAL EXP	ERIENCE:	Y	ears	Months		•	
16	МОТНЕ	R TONGUE						
17	LANGU	AGES KNOW	N					
	Lang	guage	Speak		Read		Write	
18	TOTAL 1	NO. OF DEPE	NDENTS,	if any				
19	CONTA	CT DETAILS						
Re	sidence:	STD Code			Гel. No.			
Of	fice:	STD Code			Геl. No.			
Mo	obile No.							
Em	nail ID:							

	Distt.		Stat	e			
	PIN						
PERMANENT ADDRESS							
	D: #		C				
	Distt.		Stat	e 	1		
	PIN						
ADDRESS OF PRESENT AD		STATION N	EAREST				NT AN
		STATION N	EAREST		UR PER		NT AN
	DRESS	STATION N	EAREST				NT AN
	DRESS	STATION N	EAREST				NT AN
	DRESS	STATION N	EAREST				NT AN
	Present			P	ermane	nt	NT AN

24 PAN No 25 AADHAR NO						
DECLARATION I hereby declare that all the statements made in this Application Form are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage or my not satisfying the eligibility criteria according to the requirements, 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						
I hereby agree that any legal proceedings in respect of any matter(s) or claims or disputes arising out of this application and/or out of said advertisement can be instituted by me only at Delhi/New Delhi and Courts/Tribunals/Forums at Delhi/New Delhi only shall have sole and exclusive jurisdiction to try any cause/dispute. I undertake to abide by all the terms and conditions mentioned in the advertisement given by the Company.						
PLACE: SIGNATURE OF THE APPLICANT						
DATE:	NAME:					
-X-X-X-						