

APPLICATION FORM

Job Applied For: Sales ☐ Accounts ☐ Others ☐

Post Applied For: _____

Job Reference: Advertisement: ☐ Others: ☐

Name Mr./Mrs/Ms: _____

Father/ Husband Name: Mr. / Mrs / Ms: _____

Correspondence Address _____

City: _____ District: _____ Pin: _____

Ph. No: _____ Mobile No: _____ Email ID: _____

House Status: Rented : ☐ Own: ☐ Owner Name: _____

Date of Birth: _____ Place of Birth: _____ Marital Status: Married / Unmarried

Bank A/c NO: _____ Bank & Branch Name: _____

Educational / Technical Qualifications:

Exam	Class/ Degree	College/ Board/ University Name	Year of Passing	Marks % obtained	Division	Main Subjects
PG						
Graduation						
Inter						
HighSchool						
Others						

Computer Knowledge: ☐ Internet Knowledge: ☐ Excel Formula: Basic: ☐ Advance: ☐

Smoker: ☐ Non Smoker: ☐ Vegetarian: ☐ Non Vegetarian: ☐ Alcohol User: ☐

Language known: Hindi: ☐ English: ☐ Punjabi: ☐ Others: ☐

Conveyance: Own Vehicle No: _____ D. L. No: _____ (attach photocopy)

Pan No: _____ (attach photocopy) Voter Card No: _____ (attach photocopy)

Family Details:

Family	Name	Address	Age	Working/ Household/ Studying	Mobile / Ph Nos
FATHER					
MOTHER					
WIFE / HUSBAND					
SON/BROGHTER					
SON/BROGHTER					
DAUGHTER/SISTER					
DAUGHTER/SISTER					
OTHERS:					



PREVIOUS EXPERIENCE:

EMPLOYER'S NAME & ADDRESS	DESIG-NATION	PERIOD OF SERVICE FROM TO	REASON FOR LEAVING	ONLY FOR MARKETING EMPLOYEES TA & DA PER DAY	Last Salary Drawn with bifurcation	MOBILE / PHONE NO:
1.						
2.						
3.						

PERSONAL REFERENCES

1. Give name and address **of two gentlemen, preferably government servant** (not related to you) who may speak for your conduct, etc:-

NAME	Co. / Business Name	Designation	work /Business address	Residence address	Phne / Mobile No.

2. Give name & addresses of **your two relatives:**

NAME	Co. / Business Name	Designation	work /Business address	Residence address	Phne / Mobile No.

Can you provide your salary slip: _____

Any Medical deformity / illness: _____

(You have to submit Medical Fitness certificate of Qualified Doctor, before joining, in case you are selected by the Co.)

Expected Monthly Salary & other benefits from Co.: _____

Expected Date of Joining, in case you are selected by the Co.: _____

Any additional information, not given above:

Dated:-

Signature of Applicant

For Office Use: Interview Date: _____ Selected: _____ Wait listed _____

SALARY APPROVED: Rs.

BASIC		BONUS	ON BASIC SALARY
DA Per Working Day		LEAVE	Days: _____ in year
HRA		IF, OUT STATION TOUR, PAYABLE extra:	
CONVEYANCE/TA		DA (Night Stay)	
MOBILE		EX H.Q. DA:	
Incentive @ %		CONVEYANCE	
TOTAL Salary		others, if any	

Employee Consent

I accept the terms and conditions of the co. and also accept my monthly remuneration etc.

I will join the duties of the Co. As on

Joining Date: _____

Employee Signature

Date

APPROVED BY: _____ Date: _____



For Marketing Applicant only

Annexure HR - 3

1. Area Travelled:

Sl	Area	No. of Dealers/ Distributors	Item name for which deal	Name of Dealers/ Distributors with area, to which you have good relationship.	Area of Dealers/ Distributors under relationship	Remark
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Please mention the Town/ Area and available no. of dealers / distributors in which you visited extensively and also mention the Dealers/ Distributors Name and their Area through which you good relationship.

1. Previous TA & DA : _____
2. Are you interested to travel across India: _____
3. How many days in a month: _____
4. Preferred Area to travel: _____
5. In which market, you have better control amongst Dealers/ Distributors: _____
6. In case you selected as Resident Sales Representative / ASM, which town you will prefer as your Headquarter: _____
7. Your any view in regard to Marketing / Travel etc: _____

Declaration: I hereby declare that the details furnished **above** are **true** and **correct** to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately.

Date: _____

Signature of Candidate _____



REFERENCE LETTERS (1)

Leter to be signed :

From: _____ Date: _____

Name: _____

Address: _____

To
M/s R. P. Locks Co.
14, Central Market,
Punjabi Bagh West,
New Delhi : 110026

M/s R. P. Locks Co.
Madar Gate, Agra Road
Aligarh U.P. : 202001

Dear Sir,

Appointment of Mr. _____

In your Co. as _____

It is come in my knowledge that Mr./Mrs./Miss. _____

S/o / D/o _____

Resident of _____

is being appointed by you as _____ in your Co.

To the best of my knowledge and belief, I confirm that

1. I know to Mr./Mrs/Miss _____ from last _____ years. He/She is my
_____ (mention elaatioship).

2. He/She is a gentleman/gentlewoman and has bonafide character and honest person and is not involved
in any liti aation / crime.

3. I take full responsibility of Mr./ Mrs./Miss. _____ and assure
you that in case, if he/she is found involved in any damages, losses to your Co., I will extend full co-
operate t your Co. for the recovery of losses, damages, penalties tc.

In my opinion, you may give the employment to Mr./ Mrs./Miss. _____ at
our risk and responsibility.

Yours faithfully,

Thanking you,

Signature

Name



REFERENCE LETTERS (2)

Leter to be signed :

From: _____ Date: _____

Name: _____

Address: _____

To
M/s R. P. Locks Co.
14, Central Market,
Punjabi Bagh West,
New Delhi : 110026

M/s R. P. Locks Co.
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Yours faithfully,

Thanking you,

Signature
Name

