

# State Bank of India Recruitment of Junior Associates (Customer Support & Sales) (Advertisement No. CRPD/CR/2024-25/24)

Registration Number : 2440137928

Full Name : Om Anant Khairnar

Circle : MAHARASHTRA

Circle Preference 1 (for allotment, if selected) : -

Circle Preference 2 (for allotment, if selected) :

State/UT you want to apply for : GOA

Local Language for language proficiency test : Konkani

Do you have 10th or 12th standard mark sheet/certificate evidencing having studied

Specified opted local language ?

Category : OBC

Sub Caste : Shimpi

I confirm that I am in possession / will produce EWS certificate issued based on annual income for Financial Year 2023-24

Are you trained Apprentice of SBI? : NO

Time period of apprenticeship in SBI: Start Date: -

-

Time period of apprenticeship in SBI: End Date : -

-

HRMS ID of Apprenticeship in SBI : -

Are you a person with benchmark disability of

40% and above ?

: YES

: NO

Type of Disability : VI

Sub-Type of Disability for 'd' & 'e' : -

Sub-Type of Disability : LV – Low Vision

Sub-Type of Multiple Disability : -

Are you suffering from cerebral palsy and your

writing speed is affected?

: NO

If Yes, Do you need compensatory time at the

time of examination?



Whether your dominant (Writing) hand is affected?

If Yes, Do you need compensatory time at the time of examination?

: NO

Do you intend to use the services of a scribe?

: NO

I accept the Guidelines for Scribe

Are you a person with a Specified disability covered under the definition of Sec 2(s) of the RPwBD act 2016 but not covered under the definition of Sec 2( r ) of the RPwBD Act 2016 (i.e persons having less than 40% disability) and having difficulty in writing?

If Yes, Do you need compensatory time at the time of examination?

Are you a person with a Specified disability covered under the definition of Sec 2(s) of the RPwBD act 2016 but not covered under the definition of Sec 2(r) of the RPwBD Act 2016 (i.e persons having less than 40% disability) and wish to avail the services of Scribe?

I certify that, I will produce the certificate from competent medical authority of a Government healthcare institution as per Ministry of Social Justice and Empowerment, Department of **Empowerment of Persons with Disabilities** (Divyangjan) circular no F. No. 29-6/2019-DD-III dated 10.08.2022.

I certify / undertake that Qualification of Scribe availed by me shall be one step below my qualification (OM-F.No. 29-6/2019-DD-III dated 10.08.2022).

Religion to which you belong

: Hindu

Do you belong to Religious Minority Community

: NO

Nationality / Citizenship

: Indian

Are you seeking relaxation under widow /divorced women / women judicially Separated from their husbands and who are not re-married

: NO

Are you an Ex-Serviceman?

: NO

Are you a Disabled Ex-Serviceman (DISXS)?

: NO

Period of Service (in months)

Are you a Dependent of Serviceman killed in

: NO

Action (DXS)?

Are you a Matriculate Ex-serviceman, who have : obtained the Indian Army Special Certificate of Education or corresponding certificate in the Navy or Air Force, after having completed not less than 15 years of service in Armed Forces of the Union (Such certificates should be dated on or before 31.12.2024)?

Are you already working in SBI in the clerical

: NO

: NO

cadre?

Have you earlier employed in State Bank of India and resigned from the Bank while in

clerical cadre?

Do you have record of default in repayment of loans/credit card dues and/or against whose name adverse report of CIBIL or other external agencies?

: NO

Is/are there adverse report regarding character

& antecedents, moral turpitude?

: NO

State/UT to which the Preliminary Examination

Centre Belong

: Maharashtra

State code : 30 Centre of Preliminary Examination : Pune

State/UT to which the Main Examination Centre

Belong

: Maharashtra

State code : 30

Centre of Main Examination : Pune I intend to bring the following ID when appearing : YES

for the examination : (I confirm my name on this ID and this application exactly match)

**ID** Proof : PAN Card

ID Proof No. : XXXXXX253Q

Kindly indicate Medium of Paper in Preliminary and Main Examination - how you would like

the paper to be presented to you?

: English and Hindi

### **Personal Details**

Date of Birth : 15-02-2002

Age completed as on 01.04.2024 : 22

Gender : MALE

Do you have twin brother / sister? : NO

Gender of the twin

Name of the twin

Marital Status : Unmarried

Father's First Name Anant

Father's Middle Name : Bhanudas

Mother's First Name Sandhya

Mother's Middle Name : Anant

Mother's Last Name : Khairnar

Spouse's First Name

Spouse's Middle Name

Spouse's Last Name

Address for Correspondence

Father's Last Name

Address 1 : 17 neharu housing society

near gov

: Khairnar

District : Dhule 12/19/24, 10:45 AM

State

: MAHARASHTRA

Pincode : 424002

Permanent address

Address 1 : 17 neharu housing society

near gov

District : Dhule

State : MAHARASHTRA

Pincode : 424002

#### **Contact Details**

Mobile No : +91 7666276313 Alternative Number : +91 8856058959

(Mobile No/Landline No)

Email ID : om.khairnar175@gmail.com

## Educational Qualification (as on 31.12.2024):

Exam Passed	Appeared/Passed	Degree/ Subject / Stream	Name of College /University	Date of Passing	% of Marks	Class / Grade
Graduation 1/Equivalent	Passed	Engineering	Walchand Collage of Engineering Sangli	05-03- 2023	69.00	First Class
Integrated dual degree (IDD)	Passed	Engineering	Walchand Collage of enginerring sangli	05-03- 2023	69.00	First Class

## Work experience (Start from present Employer)

Name of the Employer	Designation	Total Period From	of Service To	Nature of Duties	Reason of leaving	Years of Experience (YY/MM/DD)	
Presently : working?	NO						
Groupon Technolgie s private limited	FrontEnd developer	05/06/2023	05/11/2024	1	salary	1/5/1	

Total Experience in months: 17

#### Other Details:

Whether desirous of taking Pre-Exam Training : YES

(SC/ST/OBC/EXS/DISXS/DXS/PWBD)

State/UT : Maharashtra

State code : 30

Centre of Pre-Examination Training : Pune

## Local Language of The State:

Languages Known	LangRead	LangWrite	LangSpeak	
Konkani	YES	YES	YES	
Hindi	YES	YES	YES	
English	YES	YES	YES	
Marathi	YES	YES	YES	

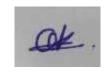
## **Uploaded Document Details:**

- 1. Left Thumb Impression
- 2. Hand Written Declaration

#### **Declaration:**

I <u>om anant khairnar</u> have filled in the online application form details on behalf of the candidate [Om Anant Khairnar]. The candidate hereby declares that "all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage/in the event any circumstances which may impair my fitness for employment in Bank do not satisfy any of the eligibility criteria stipulated, and also declare that in case of creating influence/undue pressure on my behalf regarding recruitment shall tantamount to cancellation of my candidature".

I confirm that my name as filled by me in the application form exactly matches with the name in my ID proof



HE SIGNATURE WITH WHITE BACKGROUND WITH BLUE/BLACK INK. YOUR SIGNATURE IS ACCEPTED BEYOND VALID CONDITIONS. IN CASE OF IDENTITY CHECK FAILURE AT ANY LATER STAGE OF THE PROCESS, IT COULD

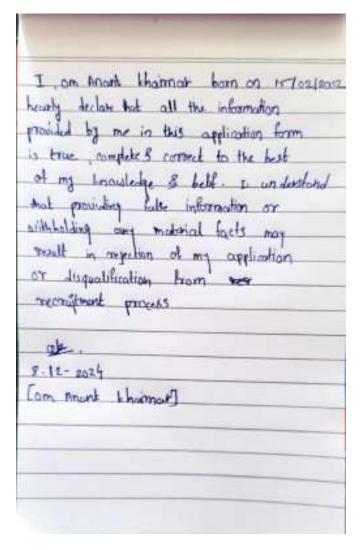
AD TO

DISQUALIFICATION

Date: 19-12-2024



Left Thumb Impression



Hand Written Declaration