

INTELLIGENCE BUREAU  
(Ministry of Home Affairs)  
Government of India

Eligibility Criteria



Candidate Photo

**Application Status**  
PaymentSuccess

**Email ID**  
arunkalayam41@gmail.com

**Application Number**  
IBACIO250377735

**Mobile Number**  
9946980221

**Candidate's Name**  
ARUN B S  
**Alternate Mobile Number**  
7356644040

Post Details

**Post Name**  
ASSISTANT CENTRAL  
INTELLIGENCE OFFICE  
R-GRADE-II/EXECUTIVE

Test City Preferences

**Preferred Test State 1**  
Kerala

**Preferred Test City 2**  
Thiruvananthapuram

**Preferred Test City 4**  
Thrissur

**Preferred Test City 1**  
Kollam

**Preferred Test State 3**  
Kerala

**Preferred Test State 5**  
Kerala

**Preferred Test State 2**  
Kerala

**Preferred Test City 3**  
Kottayam  
**Preferred Test State 4**  
Kerala

**Preferred Test City 5**  
Ernakulam

Personal Details

**Date of Birth**  
04/Mar/2002

**Religion**  
Hindu

**Nationality**  
A citizen of India

**Age as on 10.08.2025**  
23 Years 5 Months 7 Days

**Father's Name**  
BHASI D

**Reservation Category**  
OBC

**Gender**  
Male  
**Marital Status**  
Unmarried

**Mother's Name**  
SUSEELA L  
**Unique Identification Mark**  
Black Spot in Stomach

**Ex Servicemen Details****Are you an Ex Servicemen (ESM) ?**

No

**Other Details****Are you a sports person specified in Para 1 (a) of D.o.P. & A.R., O.M. No. 14015/1/76-Estt.(D), dated 4.8.1980.**

No

**Departmental Employee Details****Are you a government servant (departmental candidate)?**

No

**Correspondence Address****Address Line 1**KIRAN SADANAM EDA  
KODU PACHAYIL CHA  
DAYAMANGALAM**Address Line 2**KIRAN SADANAM EDA  
KODU PACHAYIL CHA  
DAYAMANGALAM**Country**

India

**State**

Kerala

**City/District**

Kollam

**Pincode/Postal Code**

691534

**Is Permanent Address Same as Correspondence address?**

Yes

**Permanent Address****Address Line 1**KIRAN SADANAM EDA  
KODU PACHAYIL CHA  
DAYAMANGALAM**Address Line 2**KIRAN SADANAM EDA  
KODU PACHAYIL CHA  
DAYAMANGALAM**Country**

India

**State**

Kerala

**City/District**

Kollam

**Pincode/Postal Code**

691534

**Matriculation (10th) Details****Name of the Board/Council**

CBSE

**Institute Name**

St Ann s Central School , Ayur

**Subject Combination**

All Subjects

**Qualified**

Pass

**Please select any of the following**

Percentage

**Percentage of Marks obtained (%)**

75

**Year of Completion**

2018

**Intermediate (12th) Details**

**Name of the Board/  
Council**

Higher Secondary Education

**Institute Name**

Vivekananda School, Perodrom

**Subjects**

Computer Science

**Qualified**

Pass

**Please select any of  
the following**

Percentage

**Percentage of Marks  
obtained (%)**

80

**Year of Passing**

2020

**Essential Qualification Details****Essential qualification  
Name**

Graduation or Equivalent from recognized University

**Specialization**

BSc Computer Science

**Institute /College/University  
Full Name**

Marthoma College Of Science And Technology

**Institute /College/University  
City**

Ayur

**Institute /College/University  
State**

Kerala

**Qualified**

Pass

**Month and Year of  
Joining**

07/2020

**Month and Year of  
Passing**

07/2023

**Please select any of  
the following**

CGPA

**CGPA obtained**

6.7

**Desirable Qualification Details****Do you have Knowledge  
of Computers?**

Yes

**Additional Qualification Details (If Any)****Qualification Degree**

MCA

**Institute /College/University  
Name**

Mar Thoma Institute Of Information Technology

**Institute /College/University  
City**

Ayur

**Institute /College/University  
State**

Kerala

**Specialization**

MASTER IN COMPUTER APPLICATION

**Month and Year of  
Passing**

07/2025

**Qualified**

Pass

**Please select any of  
the following**

Percentage

**Percentage of Marks  
obtained (%)**

70

**Other Qualification , If Any**

**Do you have knowledge of foreign/local language except English and Hindi?**

No

#### Experience Details

**Do you have any work experience?**

No

#### Form Submission Details

**Submission Date/Time**

2025-07-30 14:40:15

#### Payment Details

**Amount**

650

**Payment Mode**

online

**Payment Status**

Payment Success

**Payment Transaction No.**

CPAFLFBIP9

#### Documents Upload



Signature

#### Declaration

I hereby certify that the information given by me in this Application Form is true to the best of my knowledge. I certify that I fulfill the IB ACIO Executive 2025 Form eligibility criteria and undertake to produce original documents whenever necessary and I will not demand any reschedule of exam. I agree to abide by the declaration of the authorities regarding the eligibility of my application and understand that any misrepresentation or omission of facts in my application may lead to cancellation of my candidature.