

APPLICATION FOR EMPLOYMENT

Position Applied For:			Attach Photograph taken within past 3 months
PERSONAL DETAILS (Please fill up all boxes in CAPITAL LETTER) - All details are mandatory			
Name:	Date of Birth :		
Father's Name:	Mother's Name:		
Permanent Address:			
Current Address (If different from above):			
Gender -	Marital Status-	Email -	
Mobile No.:	Home No.:	Office No.:	

How Did You Get To Know About This Vacancy? Please tick one below			
<input type="checkbox"/> Employee Referral *	<input type="checkbox"/> Corporate website	<input type="checkbox"/> Jobsite	<input type="checkbox"/> Consultant **
<input type="checkbox"/> Campus	<input type="checkbox"/> Walk in	<input type="checkbox"/> Others (Please specify)	
* In case of Employee Referral please provide complete Employee Name & Employee ID -			
** In case of Consultant please provide the name of the Consultancy -			

EDUCATIONAL QUALIFICATIONS (Please give *reasons if there is gap in education)						
	NAME OF SCHOOL / INSTITUTE	COURSE	FROM	TO	FULL TIME / PART TIME	% / CGPA
Xth						
XIth						
Graduate/Diploma						
Post Graduation						
Other Qualifications						
Mention All professional courses that you have completed or even if pursuing.						
*Reason for Gap, if any:						

EMPLOYMENT HISTORY (Begin with present company first) Give *reasons in case of gap)						
Name of Company	Designation	From	To	Full / Part Time/ Contractual	Reason for Leaving	Salary + Benefits
*Reasons for Gap, if any –						

For internal use only

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Refer your family / friends for openings at DBOI:

Name	Graduation / PG course detail	Experience / Fresher	Contact Details

GENERAL

1) Do you have any relatives / friends working in our organization?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes, give Name and Details					
2) Have you ever appeared for an interview in DBOI before?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes, give details: Date of the interview:		Venue:			
3) Are you willing to work in shifts?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes, please select which shifts you are comfortable work in:		<input type="checkbox"/>	UK / Europe Shift 12.30 PM	<input type="checkbox"/>	US Shift 5.30 PM
		<input type="checkbox"/>		<input type="checkbox"/>	APAC Shift 4.00 AM
4) Do you have US Citizenship?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes, give details					
5) Are you Green Card holder for US?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes, give details					
6) If anything In process and applied for US Citizenship & Green Card?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes, give details					

I declare that to the best of my knowledge, the particulars provided are true and I hereby give my consent to the company to check my employment records with my previous employers. I am aware that any false or misleading statements made by me will be cause for dismissal if employed.

Signature of Applicant	Date
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