LAST DATE OF APPLICATION : 10th September 2009

INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY

APPLICATION FOR THE POST OF DEPUTY DIRECTOR / ASSISTANT DIRECTOR / SYSTEM ASSISTANT (Strike which ever is not applicable)

1. Name in full **(English – CAPITAL LETTERS)**	First Name	
	Middle Name	
	Surname	

Sex	Male		Female		Please paste Stamp Size Photo Graph in this box and Sign across it				
Date of Birth	**D**	**D**	**M**	**M**	**Y**	**Y**	**Y**	**Y**	

Father's / Husband's Name :

Whether belonging to SC/ST/OBC Category:

Details of Experiences

Name and Address of the Employer	Designation	Job Profile	Period		Total Duration in Years & Months	
			From	To		

Academic Qualifications as on _____2009

Qualification	Degree	Main Subjects	Year of passing	Institute / University	Overall % of marks	Class/ Division
Graduation						

Post Graduation						
Any other						

Particulars of fee	DD Number	DD Date	Drawee Bank	Amount (Rs.)

Postal Address (English – in capital letters					E-Mail				
					Telephone				
					STD Code				
	District				Pin Code				
	State								

Any other Information:

Declaration:

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that if at any stage, it is found that any information given in this application is false/incorrect or that do not satisfy the eligibility criteria, 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.

Signature of the Candidate

Date:

Note: Proof of age, category if belonging to SC/ST/OBC, qualification, marks list etc. should be furnished alongwith the application duly attested by a gazetted officer. Details can also be had on our website : www.irdaindia.org

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