**BIO-DATA FORM**

(To be returned to Office)

[*The particulars and documents listed below are required for completion of service records at this Institute. This is one of the essential requirements for absorbing/confirming a member of staff in permanent service. Please send Certificates in original along-with a copy of each in support of your age and educational qualifications etc. The originals will be returned after verification.*]

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| --- | --- | --- | --- |
| 1. | Name in Full (IN BLOCK LEITERS) | : |  |
| 2. | Full Permanent Home Address  (IN BLOCK LEITERS) | : |  |
| 3. | Local address at Visakhapatnam (Please notify changes, if any, from time to time) | : |  |
| 4. | Father's Name (and also Husband's  Name in the case of a woman employee, if married) and their residential addresses | : |  |
| 5. | Nationality  If a member of Scheduled Caste/Scheduled Tribe. particulars of Caste/Tribe. | : |  |
| 6. | Date of Birth by Christian Era Educational Qualifications (Please indicate the Universities/Institutes which awarded Degree/Certificate | : |  |
| 7. | Field of Specialization | : |  |
| 8. | Exact height (cm) by measurement (without shoe) | : |  |
| 9. | Personal mark for identification (if any) | : |  |
| 10. | Home Town | : |  |

|  |  |  |
| --- | --- | --- |
| Signature | : |  |
| Designation | : |  |
| Department | : |  |
| PAN No | : |  |
| Aadhar No (UID) | : |  |
| NPS No | : |  |