

(Bring this Bio-Data form duly filled in and submit at the time of document verification)

THE ANDHRA PRADESH STATE COOPERATIVE BANK LTD.

PLEASE FILL THE FOLLOWING INFORMATION IN BLOCK LETTERS

1. ROLL NO. : _____

2. FULL NAME (as per SSC Certificate)
Mr./Ms./Mrs. _____

PLEASE PASTE A
RECENT
PHOTOGRAPH
AND SIGN
ACROSS IN
FULL (PASSPORT
SIZE)

3. ADDRESS FOR CORRESPONDENCE :

CITY	PIN
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Cell No. : _____ e-mail id: _____

4. DATE OF BIRTH : DD MM YYYY
(As per proof of)

5. GENDER : MALE FEMALE
(indicate by _/ mark in appropriate box)

6. MARITAL STATUS : _____

7. WHETHER CANDIDATE ACQUIRED PROFICIENCY IN TELUGU & KNOWLEDGE OF ENGLISH YES / NO

8. (a) DETAILS OF EDUCATIONAL QUALIFICATIONS :

Qualification	University/ Institute/ Board	Year of Passing	Divisio n/ Class	Marks in % *	Subjects studied
Classes X IX					SSC/CBSE/ICE S
Intermediate or equivalent					
Graduation					
Post - Graduation					

11 (b) ADDITIONAL QUALIFICATIONS, if any :					
Name of the Course	University/ Institute	Duration of Course	Division / Class/ Grade	Mark s %	Subjects covered

** The percentage of marks in graduation shall be arrived at by dividing the aggregate/total marks obtained by the candidate in all subjects, **as graded by the concerned University/ Board**, with the aggregate maximum marks of the examination passed for all the years of the examination.*

9. DETAILS OF EXPERIENCE, if any:

Organisation	Post held	Nature of job	Period of service (Dates)		No. of completed years of service
			From	To	
Total period of experience (in years)					

DECLARATION

I hereby declare that all the statements made in this application are true and if any of the particulars furnished by me are found to be incorrect or suppressed, my candidature is liable to be rejected at any stage of the selection process. Even though it is found after my appointment in APCOB that the particulars furnished by me are incorrect or have been suppressed, my services are liable to be terminated without any notice.

PLACE: _____

DATE: _____

SIGNATURE OF CANDIDATE

NAME OF THE CANDIDATE