

**Office of the e-Governance,
Rural Development and Panchayat Raj Department**

**3rd Floor, 3rd Gate, M.S Building, Dr. Ambedkar
Veedhi, Bengaluru-560 001**

APPLICATION FORMAT

AFFIX YOUR
RECENT
PASSPORT
SIZE PHOTO

**APPLICATION FORMAT FOR THE POSTS OF
ACCOUNT EXPERT**

NAME: _____

DATE OF BIRTH (dd/mm/yy): _____ **AGE** _____
(SSLC marks card to be enclosed for age proof)

PERMANENT ADDRESS: _____

ADDRESS FOR COMMUNICATION: _____

CONTACT NO: PHONE: _____ **MOBILE:** _____

EMAIL ID: _____

EDUCATIONAL QUALIFICATIONS:

SL. NO.	QUALIFICATION	SEMESTER / YEAR	YEAR OF PASSING	MAXIMUM MARKS	MARKS OBTAINED	% OF MARKS

EXPERIENCE:

SL. NO.	ORGANISATION*	DESIGNATION	HR CONTACT NO.	DURATIONS		TOTAL MONTHS OF EXPERIENCE	
				FROM	TO	FROM	TO

*** A brief note on every organization shall be given, such as No. of years of establishment, No of employees on roll, Industry in which the organization is performing, turn over, etc., in resume.**

REFERENCES:

SL. NO.	NAME	ADDRESS	CONTACT NO.

ACHIEVEMENTS & HONOURS:

- 1.
- 2.

Note: Enclosed self attested

- a) Detailed Resume.
- b) Marks cards of all semesters.
- c) Educational qualifications certificates.
- d) Experience certificates.

SIGNATURE OF THE CANDIDATE