



Institute for Development & Research in Banking Technology

(Established by Reserve Bank of India)

Castle Hills, Road No.1, Masab Tank, Hyderabad – 500 057

Ph.91-40-23294000 / 4999 – 85; Fax: 91-40-23535157; Website: www.idrbt.ac.in

Application for Technical Project Manager

(Please type or write using BLOCK LETTERS)

Please affix
a recent
passport size
photograph

Advertisement No :

19/2021-22																			
------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

1. Name in full

Married Single Male Female (Please tick "✓")

2. Address:

Present

Permanent

Mobile

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone

Office																				
Res:																				

3. Date of Birth: (As per Matriculation Certificate)

--	--	--	--	--	--	--	--

 Day Month Year

4. Age (in years)

--	--

5. Nationality:

--	--	--	--	--	--	--	--	--	--

6. Present employment:

Designation																								
Organization																								
Date of Joining																								
Scale of pay Rs.																								
Pay Rs.																								
Total Emoluments (per month) Rs.																								

7. Indicate category to which you belong to by marking "v" in the appropriate box

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GEN	SC	ST	OBC

8. Academic Record starting with Matriculation:

S. No.	Qualifications	Specialisation	College/ University/ Institute	Year of Joining	Year of Passing	Percentage

9. Details of Technical Qualifications / Certifications:

10. Employment Particulars / Experience

S. No.	Name of the Employer	No. of years served	Period		Designation	Scale of Pay / Remuneration
			From	To		

11. Details of research work / experience / skill sets: _____
(Separate Sheet can be added as Annexure)

12. Specialisation with reference to experience desired for the post

13. Please attach your detailed CV

14. Any other information you wish to furnish

15. Names and addresses of two Referees

Name		
Designation		
Organisation		
Address		
Mobile No.		
Email – ID		

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 I do not satisfy the eligibility criteria according to the Institute, 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.

PLACE:

DATE:

Signature of the Applicant: _____

Name of the Applicant: _____