**APPLICATION FOR APPOINTMENT AS INTERNAL OMBUDSMAN ON CONTRACTUAL BASIS**

Paste passport size photograph and sign across the photograph

To,

The General Manager (HR),

Union Bank of India,

8th Floor, HR Dept.

Union Bank Bhavan,

239, Vidhan Bhavan Marg,

Nariman Point, Mumbai

Maharashtra -400021

With reference to your advertisement dated June 27, 2018, for appointment as Internal Ombudsman on Contractual Basis, I submit my application as under:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name**  (in full -First name, middle name and last name) |  | | | |
| **Father’s/ Husband’s Name** |  | | | |
| **Mother’s Name** |  | | | |
| **Gender**(tick on appropriate box) | Male | | Female | |
| **Category**(tick on appropriate box) | SC | ST | OBC | GEN |
| **Nationality** |  | | | |
| **Date of Birth** |  | | | |
| **Age**  (as on 01.04.2018) | Year –  Month – | | | |
| **Religion** |  | | | |
| **Marital Status** |  | | | |
| **Permanent Address** |  | | | |
| **Correspondence Address** |  | | | |
| **Contact Details** | Landline No.:  Mobile No.:  Email ID: | | | |
| **Application Fee Payment Details** |  | | | |
| **If person with Disability (Tick mark)** | YES NO | | | |
| **Type of disability** |  | | | |
| **Percentage of disability** |  | | | |
| **Place of Birth** |  | | | |
| **Native Place** |  | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Languages known:** | | **Read** | | | | **Write** | | **Speak** |
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|  | |  | | | |  | |  |
| **Educational & Professional Qualifications (Starting from Graduation)**  As on 01.04.2018 | | | | | | | | |
| **Exam passed** | | | | | **% Marks obtained** | | | |
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| **Work Experience**  As on 01.04.2018 | | | | | | | | |
| **Name of the Employer** | **From** | | **Till** | **Designation** | | | **Responsibilities in brief** | |
|  |  | |  |  | | |  | |
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| **Total Work Experience (in years)** | | | |  | | | | |
| **Position Last Held** | | | |  | | | | |
| **Disciplinary Action if any** | | | |  | | | | |
| **Major illness as on date if any** | | | |  | | | | |
| **Awards / Recognitions** | | | |  | | | | |
| **Extra Ordinary Achievements, if any** | | | | | | | | |

**Place:**

**Signature**

**Date:**