File No.PASMID-41011/9/2023-DRDC SEC(PASMID)



GOVERNMENT OF WEST BENGAL OFFICE OF THE DISTRICT MISSION DIRECTOR & DISTRICT MAGISTRATE (DISTRICT MISSION MANAGEMENT UNIT – PASCHIM MEDINIPUR)

3rd Floor, Minority Building, Collectorate Campus, Medinipur, Paschim Medinipur, PIN – 721101

Phone: 03222-275281 / Email: anandadhara.pmid@gmail.com

$\frac{APPLICATION\ FORM\ FOR\ THE\ POST\ OF\ BANKING\ CONSULTANT\ /\ BANKING\ RESOURCE\ PERSON\ FOR}{\underline{DMMU,PASCHIM\ MEDINIPUR}}$

To, The Additional District Mission Director, DMMU (Anandadhara), Paschim Medinipur.						Paste here		
Subject: Application for the Post of Banking Consultant / Banking Resource Person.						Recent PP size Colour Photo		
Sir,								
In the response to the Ne	otice No: .					dated:		
	I beg to of	ffer mysel	f as a candi	date for	identificat	ion of Banking		
Consultant / Banking Resour	rce Person u	nder DM	MU, Anand	adhara, 1	Paschim N	Medinipur. My		
details are given below:								
1. Post Applied for: Banking	Consultant	/ Banking	g Resource l	Person				
2. Name of the Applicant (In	Block Letters	s):	<u> </u>					
2. Eathan's / Husband Name	of the Amelia	o						
3. Father's / Husband Name of	The Applica	ant:						
				<u> </u>				
4. Date of Birth (DD/MM/YYYY): / / /								
5. Age as on 01/07/2024:		Years		Months		Days		
6. Category: (Please ✓)	Gen	SC	ST	OBC-	A	ОВС-В		
7. Condam (Diagram)		1			_			
7. Gender: (Please ✓)	Male		Female		Others			

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Phone:	03222-275	5281 / En	nail: ana	ndadha	ara.pm	id@gma	ail.com	
8. Nationality:								
10. Date of Retirement:								
11. Post held at time of R	etirement:							
12. Name of Bank from w (With Address)	hich Retire	ed:						
13. Permanent Address:								
14. Communication Addr	ess:							
15. EPIC No :								
16. Aadhaar No:								
17. E-mail ID:								
18. Mobile Number:								
19. WhatsApp Number:								

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Phone: 03	222-27	75281 / Email:	anandadhara	a.pmid@gma	il.com	
20. Highest Educational Qua	lificati	ion: (attached	Self Attested	l Copies of Co	ertificate	/ Marksheet)
Name of Examination		Board / University		Main Subject		% of Marks Obtained
21. Work Experience, (attach	ned Se	lf Attested Co	pies of Expe	rience Certifi	cate)	
Name of the Organization	Designation Held		Dura	ation	Responsibilities/	
			From	То	Assignment	
					L	
22. Professional / Computer	Qualif	ication: (Ment	ion Briefly)			
List of Enclosures (Self	Attest	ted):-				
□ 04 copies of recent pa		•	hotographs (One to be pas	ted on ap	plication)
☐ Age proof (Birth Cer	tificat	e/Admit Card	of MP)			
☐ Caste Certificate, (if a	•					
☐ Residential proof (Re	sident	ial Certificate/	GAS Bill/El	ectricity Bill/	Bank Pas	s Book –Front
Page) □ EPIC						
□ Aadhaar						
☐ Educational Qualification	ation C	ertificates.				
☐ Work Experience Cer						
☐ Computer Course Cen		•				
Date:						
Place:				Full Sign	ature of the	he Applicant