



Application Form

Date _____

Post Applied For _____



Photograph

Personal Details

Name _____

Surname _____

Name _____

Husband's / Father's Name _____

Date of Birth _____

Age _____

Height _____ Ft _____ Cms

Weight _____ Kgs

Blood Group _____

Rh _____

Period of stay in Mumbai _____

Sex

Male ☐

Female ☐

Marital Status

Single ☐

Widower ☐

Single Parent ☐

Married ☐

Divorced ☐

No of Children _____

Religion _____

Nationality _____

Domicile _____

Present Address : _____

Permanent Address _____

Res. Tel. No _____

Office Tel No _____

Is this place your own / rented _____

Mobile No _____

if rented, how much rent do you pay _____

Email Id _____

Passport No:- _____

Countries Traveled _____

Health

How would you rate your present health

Good ☐

Fair ☐

Poor ☐

Physical handicaps, if any _____

Do you wear spectacles

Yes ☐

No ☐

Were you seriously ill, injured or operated upon

Yes ☐

No ☐

If yes, give details _____

Languages known

Speak _____

{Please underline your

Read _____

mother tongue}

Write _____

Are you presently employed

Yes ☐

No ☐

Are you member of the employee PF

Yes ☐

No ☐

if yes give details _____

Notice period required to join _____ Months / Days

Have you been interviewed by us before

Yes ☐

No ☐

Do you own a Car

Yes ☐

No ☐

Scooter

Yes ☐

No ☐

Present Annual Gross Salary _____

Annual Gross Salary Expected _____ Negotiable

Yes ☐

No ☐



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Relationship	Name	Age	Occupation	Annual Income
Father				
Mother				
Brother's				
Sister's				
Wife / Husband				
Children				

Educational And Professional Qualifications (Please attach photocopies of certificates)

if you have completed any Management Studies, please give full details about the timings (whether full time or part time) and the duration of the course

Degree/ Diploma Certificate obtained	Name / Location of university /School / College	Date attended To	From	Class and % marks obtained	Main subjects

Short Term Courses / Programmes : (Please attach photocopies of certificates)

description of course	Name / Location of Institute	Year	Duration	Certificate

Have you own any Scholarships/ Awards _____

If so give details _____



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General

Do you have any relative employed in Estate/Facility/Hospitality activities

Yes ☐ No ☐

Name _____

Relationship _____

Name & Address of such company / Organization where he / she is working _____

Extra Curricular Activities

Hobbies , if any _____

Interest in sports/ games, if any _____

Special interest, if any _____

Memberships

Professional Bodies _____

Social Organizations _____

Clubs / Societies _____

Considering your qualifications and experience, briefly describe the position and activities you are best suited for

Please attach copies of appointment and relieving letters and salary certificates from previous employers

If working, please attach present salary certificate

1. Present / Last Job

Name & Address of Company with Tel No		Nature of Business/ Products & Company's	
---------------------------------------	--	--	--

Period Employed	From :	To :
-----------------	--------	------

Position Held	Starting	Leaving
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Details of salary will all benefits	Starting	Leaving	Present
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Name & Designations of immediate senior		Nos of Persons reporting to you	
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Details of responsibilities / duties	
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Reasons for leaving or seeking change	
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2. Previous to 1

Name & Address of Company with Tel No		Nature of Business/ Products & Company's Turnover	
Period Employed	From :	To :	
Position Held	Starting	Leaving	
Details of salary will all benefits	Starting	Leaving	Present
Name & Designations of immediate senior		Nos of Persons reporting to you	
Details of responsibilities / duties			
Reasons for leaving or seeking change			

3. Previous to 2

Name & Address of Company with Tel No		Nature of Business/ Products & Company's Turnover	
Period Employed	From :	To :	
Position Held	Starting	Leaving	
Details of salary will all benefits	Starting	Leaving	Present
Name & Designations of immediate senior		Nos of Persons reporting to you	
Details of responsibilities / duties			
Reasons for leaving or seeking change			



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4. Previous to 3

Name & Address of Company with Tel No		Nature of Business/ Products & Company's Turnover	
Period Employed	From :	To :	
Position Held	Starting	Leaving	
Details of salary will all benefits	Starting	Leaving	Present
Name & Designations of immediate senior		Nos of Persons reporting to you	
Details of responsibilities / duties			
Reasons for leaving or seeking change			

References

Give prominent references (other then relatives / past employers)

Name	Official Designation	Address	Capacity in which he/ she knows you	Period	Tel. No

I Testify that the information given in this form is true to the best of my knowledge and belief

Signature



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For Office Use

Report

Sp

P

At

Atr

A	B	C	D

Remarks :-

Approved for appointment _____ Engaged _____ On _____

Position _____ Probation period _____ Remuneration _____

Date of Report _____ Interviewed by _____

Signature

Manager , HR

