APPLICATION WITH BIO DATA FOR POST OF OFFICER IN RISK DEPTT

To,

The Chief Executive Bank of Baroda Country Office, Muscat MBD Area, P.O. Box:1610 Ruwi, Postal Code:112 Sultanate of Oman

Photograph

Post Applied for	Officer in Risk Deptt			
Full Name of Applicant				
Mr. / Mrs./Ms.				
Date of Birth DD-MM-YY	Nationality			
		ID / Civil Card No.		
		Expiry Date of Card		
Driving License (Y/N)		Passport No.		
Address for Communication		Residential Address		
PO Box				
Postal Code				
Phone	GSM	Contact Number		
Email				
Marital Status		Details of spouse's employment (If any)		
Number of Dependents				
Languages Known	Speaking	Reading	Writing	
English				
Arabic				
Others (specify)				
Academic Qualifications (Secondary School onwards)				

Level / Course	Course Duration (Years)	Name of Board / College / University	Percentage of Marks
	Certificate in	n Risk fulfilling eligibility Criteria	3
Level / Course	Course Duration (Years)	Name of Board / College / University	Percentage of Marks
	Training	Attended during last 05 years	
Name of Training	Duration	Name of Academy/Training Institute	Key learning areas

Present Employer's Particulars	Present Designation:	
	Position Held (Since) :	
Name of Co. :	Job Responsibilities :	

Address				
Address :				
		Monthly salary drawn at present:		
			Basic Pay :	RO
			,	
Telephone No.			Other Monthly Allowances : RO	
Contact Person :		Gross Monthly Salary : RO		
	I	Details of Working Expe	rience (Last 5 years)	
From	То	Designation	Deptt	Employer's Name
		8		p.oye. e
Level of Computer A	l wareness			
		Computer Courses u	ndergone (If any)	
Hobbies/ interest				
	1	Details of Borro	wings, if any	
Purpose			Amount	Present Outstanding
	Source			

Monthly obligation / repayment:				
Whether the candidate has ever been convicted by any court of I	aw or has any court case			
pending against him / her:		Yes / No		
If Yes, please furnish details in Separate sheet				
Names of Two persons (not related	to the candidate for referen	ce)		
Name and Address	Name and Address			
Designation	Designation			
Contact No.	Contact No.			
Name of Relatives, if any working with Bank of Baroda, Oman :	•			
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The information stated above is true to be best of my knowledge and belief, and I agree that the Bank may from time to time, after receipt of this application, make enquires about my affairs as it may think fit. I also understand that my application is				
liable to be rejected if any of the above information is found to be incorrect / incomplete.				
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Place:	Signature			
Date:	1			
Please submit scanned copy of application at <u>hr.oman@bankofbaroda.co.in/ce.oman@bankofbaroda.co.in</u> with				
Qualification documents				

In case of any query, Please contact at 24820484 / 24810250