Application for the Post of Director, and Senior Adviser of CAFRAL

[The form duly filled-in (typed and not handwritten) and CV may be sent by mail to cafralssc2025@rbi.org.in]

1. Positi	on Applied for						
2. Full N	Jame						
3. Person	nal Details						
Date of	Birth						
(DD/MM/YYYY)							
Gender							
Father's	Name						
Mother's	s Name						
Address for Correspondence							
District		State	Country		Pin		
4. Contact Details							
Phone N	lo.		Mobile No				
Email Id	1						
5. Educational Qualifications							
Degree S		Subject / Stream	J ,		Year of Passing		

6. Details of Work Experience (Chronologically, starting with Latest Position held. Specify the Leadership positions held, if any) (attach a separate sheet)						
Total Work Experience (in YY/MM)						
7 Dublications (attack a compute sheet)						
7. Publications (attach a separate sheet)						
8. Statement of Intent/ Vision for CAFRAL (attach a separate sheet)						
0. Deferences (Min. 2) (Name Designation Attached Institution & Contact details)						
9. References (Min. 2) (Name, Designation, Attached Institution & Contact details)						
1.						
2.						
3.						
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 prescribed in the advertisement, 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 the same. I also hereby declare that no criminal case is pending against me, and I have not been prosecuted by any court of law.						
Signature						
Place						
Date						