Format BANK OF MAHARASHTRA

Application for the empanelment as a faculty : Name of Centre:

1	Name in Full (Blo	ock letters):		
2	Date of Birth and	Age:		
3	Permanent Address:			
4	Present Address:			
5	Contact details:		Phone No. Mobile No. Email address: Fax.	
6	Educational Qual	ifications:		
7	Scale at the time of superannuation and name of the bank			
8	organisation a superannuation.	sent position, the and date of		
8	Work experience	:(last 10 years)		
	Organisation	Position held	Nature of job	Duration
9	Computer knowledge			
10	Expertise in subjects			
11	Other relevant inf	formation:		
12	Expertise in subjects			
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Place: