

Indian Overseas Bank  
Central Office, 763, Anna Salai, Chennai – 600 002

Apprentice Biodata Form

Field		Details	
1. Personal Information	STATE APPLIED FOR:	For Office use only	Photo
	<b>Full Name:</b> (First Name, Middle Name, Last Name)		
	<b>Date of Birth:</b> (DD/MM/YYYY)		
	<b>Languages known</b>	Mother Tongue	
		Can Write	
		Can Speak	
	<b>Gender:</b> (Male/Female/Other)		Nationality:.....
	<b>Category</b> (SC/ST/OBC/EWS/PWD/Others)		Religion:
	<b>Whether Physically Handicapped, if Yes Type of Disability and % of disability</b>	Yes / No Type..... % of disability .....	
	<b>Identity Document No.</b>	Aadhar No/ Passport No.....	
		PAN No.....	
		Driving License no./ Voter ID No.....	
	<b>Address:</b> (Street, City, State, Zip Code)	Permanent Address :	
		Current address (if different) :	
	<b>Contact Details:</b> (Mobile and/or Home)	Mobile No. (Self)	
		Alternative No	
		Email id :	

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2. Educational Qualifications:

Academic Qualification	Institution Name	Board / University	Year of Passing	Percentage / Grade
10 <sup>th</sup> Standard				
12 <sup>th</sup> Standard				
Graduation				
Diploma / Certification				
Others Qualification				
Any Professional Qualification				

**Internship / Training Experience (if any):**

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**Skills and Competencies:**

1. **Technical Skills:**

2. **Soft Skills:**

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**References:**

	Reference 1	Reference 2
Name of the Reference		
Relationship (Teacher / Relative etc)		
Contact number of the Reference		





**INDIAN OVERSEAS BANK**

**COMMON UNDERTAKING FORM**

I ..... son / daughter / wife of Shri.  
..... residing at  
.....  
.....  
District ..... State

..... hereby declare that the details submitted by me in the Online application and at the time of personal interaction / document verification for engagement of apprentices in Indian Overseas Bank is true to the best of my knowledge. I undertake to submit all necessary documents at the time of engagement as apprentices in the Bank.

I fully understand that in the event of not submitting the required documents/certificates as proof of the detail submitted by me or if particulars submitted by me are found to be incorrect/false, my candidature for engagement as apprentices in the Bank will be unilaterally cancelled by the Bank without any notice to me at any point of time.

I also state that no FIR/Criminal Case is registered against me and I have not been convicted by the Court for any offence.

I further understand that the Bank may initiate any action including under Civil and Criminal Law against me and as deemed fit, in case if any of the information/data/papers/certificates provide by me turn out to be false/fake/forgery etc.

Signature

Place:

Date:

## Declaration of Fidelity and Secrecy

(Sub sub-section (2) and (3) of Section 13 of the Banking Companies  
(Acquisition and Transfer of Undertakings) Act 1970)

I ..... do hereby  
(name in block letters)

declare that I will faithfully truly and to the best of my skill and ability execute and perform  
the duties required of me as **Apprentice**

of the Indian Overseas Bank and which properly relate to the office or position in the said  
Indian Overseas Bank held by me.

I further declare that I will not communicate or allow to be communicated to any person not  
legally entitled thereto any information relating to the affairs of the Indian Overseas Bank or  
to the affairs of any person having any dealing with the Indian Overseas Bank nor will I allow  
any such person to inspect or have access to any books or documents belonging to or in the  
possessions of the Indian Overseas Bank and relating to the business of the Indian Overseas  
Bank or to the business of any person having any dealing with the Indian Overseas Bank.

Place .....

Signature .....

Date .....

**Position as: Apprentice  
Indian Overseas Bank**

Attested by

.....

# Indian Overseas Bank

CENTRAL OFFICE

763, Anna Salai, Chennai 600 002.

Date :

Name ..... Age ..... Sex .....

Occupation ..... Married / Unmarried .....

## MEDICAL HISTORY

### History of Previous illness :

Fits ..... Small Pox .....  
Typhoid ..... V. D. ....  
Operation, if any .....  
Disability, if any .....

### Immunization Record :

T.A.B. .... Vaccination .....  
Others ..... Last Date .....

### Family History :

T.B. ....  
Diabetes .....  
Insanity .....

The facts given above are true and correct to the best of my knowledge.

Signature of the Candidate

## PHYSICAL EXAMINATION

### General Appearance :

Skin ..... Height ..... in cms. Weight ..... in kgs  
Glands ..... Temperature .....

### Respiratory System :

Chest-Build and Shape .....  
Full Insp ..... Full Exp .....  
Rate of Resp .....  
Lungs .....

### Circulatory System :

Heart ..... Apex Beat .....  
Pulse ..... B P .....

### Digestive System :

Teeth and Gums ..... Liver .....  
Throat ..... Spleen .....

### Others :

Generative System ..... Hydrocele .....  
V. D. .... Hernia .....  
Eye .....  
Urine ..... React on ..... Sp. Gr. ....  
ALB ..... Sugar .....

Remarks :

Medical Officer  
Regd. No. Rank and Address  
(Not below the rank of a Civil Assistant)