



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

12. Work Experience: (Present and Past) No. of Years _____ Months _____

Name of the Employer	Tenure of Employment		Post occupied	Reasons for Leaving
	From	To		

13. Languages Known

Language	Write	Read	Speak

14. Have you ever been prosecuted, detained, fined, convicted or awarded any sentence by any court of law for any offence or any case is pending against you? YES/NO
If so, please give full details.

15. Any other information.

DECLARATION:

I hereby declare that all the statements made in this Application hereinabove are true and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incorrect or incomplete or if I am found ineligible due to non-fulfillment of eligibility criteria, my candidature for the absorption is liable to be cancelled /rejected at any stage of the process

Date :

(Signature of the Applicant)

Place :

(All questions have to be answered. No Question shall be left blank. Give brief and correct answers. If the reply to any question needs more space, details should be given in separate paper duly signed)

The eligible concerned workmen are requested to submit the Bio data in the above format along with the self attested copies of the documents to the address mentioned below to **reach on or before 21.08.2015:**

**LIC of India,
Post Box No 11511
Nariman Point Post Office
Mumbai Pin 400021.**