

*Name TITLE SURNAME NAME

Mr Mrs Ms Dr

*Father's / Husband's Name

*Date of Birth (DD/MM/YY) *GENDER M/F Marital Status Single Married Divorcee Widow

No. of Dependents *Identification Mark

DATA AT THE TIME OF APPOINTMENT

*Date of Appointment (DD/MM/YY) *Grade A B C D Ind.Worker HRMS No. (If Exists)

*Reason of Appointment Court Order Compassionate Grounds DoT Employees Deputation-In BSNL Recruitree

*Circle _____ *SSA _____ Parent Circle / SSA _____
 (At the time of Joining) (At the time of Joining)

*Employee group Absorbed Unabsorbed BSNL Recruitree Deputation-In *Cadre *Cadre Type

Nationality _____ State/Country _____ Religion _____ Mother Tongue _____

Other Information (If Any)

DATA AT THE TIME OF RETIREMENT

*Date of Retirement (DD/MM/YY) *Reason Retirement Superannuation Resignation *Grade A B C D Ind.Worker
 (Retirement)

Circle _____ SSA _____ Work Area / Place _____
 (At the time of Retirement) (At the time of Retirement) (At the time of Retirement)

*Employee group Absorbed Unabsorbed BSNL Recruitree Deputation-In Cadre Cadre Type

Other Information (If Any)

PAYMENT / BANK DETAILS

*Payment Mode Cheque Bank Transfer

BANK ACCOUNT DATA
 (Applicable Only If "Bank Transfer" Payment Mode is selected)

Bank Name _____ Branch _____ IFSC Code

A/C Type Savings Current A/C No:

I hereby declare that all the above information is true to the best of my knowledge

Signature of Employee Separated

Address: _____

Mobile:

For office use

PERNR Created in E R P

Date of Creation (DD/MM/YY)

Created By _____ Remarks _____