



KARNATAKA ANTIBIOTICS AND PHARMACEUTICALS LIMITED
(A Government of India Enterprise)

Nirman Bhavan, Dr. Rajkumar Road, 1 Block, Rajajinagar, Bangalore – 560 010

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Affix latest
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size
photograph

APPLICATION FOR EMPLOYMENT

APPLICATION FOR THE POST OF _____
in response to _____

1) Name in full _____

2) Date of Birth & Age _____ Father's / Husband's Name _____

3) Present Postal Address _____ Permanent Address : _____

4) Telephone : Res. _____ Cell : _____ E-mail _____

5) Nationality

Religion : Hindu Muslim Christian
Sikhs Buddhist Zoroastrians [Parsis] Others

Caste :

* Scheduled Caste [SCs] Scheduled Tribe [STs] Ex-Serviceman Persons With Disabilities [PWDs]

* Other Backward Communities [OBCs] Others :

* (Tick Mark which is applicable)

6) Employment Exchange Registration No. Place

7) Dependents:

Name	Age	Relationship

8) Educational Qualification/s: (Commencing from the highest Qualification)

Degree/Diploma	Institute/University	Year of Passing	Main Subjects	Class/Division marks	%

9) Experience (Commencing from the present employment) includes all experience even if some of it is on part time / regular / contract basis or Training.

Employer/ Organisation	Period From To	Designation	Last Gross pay (P.M) Rs.	Reason for Leaving

NOTE : If space is insufficient, separate sheet can be enclosed.

10) Give details of the circumstances under which you resigned or your services were terminated in the previous employment.

11) Language Proficiency Language Known*	Speak		Read		Write	
	Well	Not so well	Well	Not so well	well	Not so well
I. _____	[]	[]	[]	[]	[]	[]
II. _____	[]	[]	[]	[]	[]	[]
III. _____	[]	[]	[]	[]	[]	[]
IV. _____	[]	[]	[]	[]	[]	[]

12) Are you related to any employees or Director of this company? If so give details:

13) State minimum Gross salary acceptable to you:

Rs. _____

 P.M.

14) If not found suitable for the post applied for, are you willing to be considered for a lower post? Yes / No

15) State why you feel you are suitable candidate for the post applied ?

16) Joining time required in case of selection

17) Reference (other than relatives)

Sl.No.	Name	Designation	Address

I hereby affirm that all the information/s furnished above is true and complete to the best of my knowledge and belief, I am fully aware that canvassing in any form will disqualify my candidature.

Date:

Place:

Signature of the Applicant