



**SOCIETY FOR ELECTRONIC TRANSACTIONS AND  
SECURITY [SETS]**

CIT Campus, MGR Knowledge City,  
Taramani, Chennai – 600 113. India.



**PERSONAL PARTICULAR FORM**

1. Advertisement No :SETS/Chn/Rec/Proj/2019/05
2. Post applied for : \_\_\_\_\_
3. Name in full (in block letters) : \_\_\_\_\_
4. Father's/ Spouse's name : \_\_\_\_\_
5. i) Date of Birth : \_\_\_\_\_  
ii) Age as on closing date : \_\_\_\_\_
6. Nationality : \_\_\_\_\_
7. Religion : \_\_\_\_\_
8. Category (SC/ST/OBC/PH/General) : \_\_\_\_\_
9. Address for correspondence(in block letters) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Contact Telephone No. / Mobile No. : \_\_\_\_\_
- E-mail ID : \_\_\_\_\_
10. Permanent address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Current Position with organisation details : \_\_\_\_\_  
(write NA if not applicable) \_\_\_\_\_
12. Educational Qualification (in chronological order from 10<sup>th</sup> standard onwards):

Sl. No.	Degree/Certificate	Year of Passing	% of Marks obtained or CGPA	University / Institute	Subject specialization	Remarks (if any)



13. Employment (in chronological order starting with the first job):

SI. No.	Period		Name of Organization	Position held	Salary drawn with scale of pay and grade pay	Jobs / Duties handled
	From	To				

14. Details of research work / experience/ Skill sets: \_\_\_\_\_  
 (Separate sheet can be added as Annexure) \_\_\_\_\_

15. Specialization with reference to \_\_\_\_\_ : \_\_\_\_\_  
 experience desired for the post \_\_\_\_\_

16. Honors / Awards received if any \_\_\_\_\_ : \_\_\_\_\_

17. Any other information you wish to furnish : \_\_\_\_\_

18. Reference (Two)

	1	2
Name		
Designation		
Address		
Mobile No.		
Email ID		



19. Declaration:

I certify that the information furnished above are correct and complete to the best of my knowledge and belief and nothing has been concealed / distorted. If at any time I am found to have concealed/distorted any material/information, my appointment shall be liable to be summarily terminated without notice/compensation.

(Name and Signature of the Applicant)

Date :

Place:

List of Documents attached:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_