

BIO-DATA FORM FOR EMPLOYEES OF INCOME-TAX DEPARTMENT

(FOR EMPLOYEE CODE)

[illegible]

A. GENERAL PARTICULARS

[illegible]

2(I). EMPLOYEE (TO BE LEFT BLANK)

2(II). CIVIL LIST

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(CODE NO/ SENIORITY NUMBER)

Year				
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3 SEX(MALE-M, FEMALE-F)

4. DATE OF BIRTH

		-			-				
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 (DD-MM-YYYY)

5. MARITAL STATUS (MARRIED-1/UNMARRIED-2) ☐ (Unmarried includes not yet married, widow, widower or Divorcees)

6.COMMUNITY TO WHICH YOU BELONG (SC-1, ST-2, OBC-3, OTHERS-4)

7. DATE OF ENTRY TO THE GOVT. SERVICE			-			-				(DD-MM-YYYY)
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8. DATE OF JOINING INCOME-TAX DEPARTMENT

		-			-			
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 (DD-MM-YYYY)

14. PREFERRED PLACE OF POSTING

1

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2

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3

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15. AREA OF SPECIALISATION/SPECIAL EXPERIENCE (Please indicate your area of specialization based on your job experience.)

1

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2

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3

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16. FIELD OF SPECIAL INTEREST (Please indicate the area which interests you most in relation to the job opportunities available in the Department.)

A. RELATING TO JOB

1

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2

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3

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B. NOT RELATING TO JOB

1

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2

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3

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17. LANGUAGES KNOWN (INDIAN AND FOREIGN); Starting With Mother Tongue (English not to be included)

	LANGUAGES																READ(Y/N)	WRITE (Y/N)	SPEAK(Y/N)
1																			
2																			
3																			
4																			
5																			

C. SERVICE PARTICULARS

Sl.No.	RANK	DATE OF APPOINTMENT							
		D	D	M	M	Y	Y	Y	Y
1	CHAIRMAN			-					
2	MEMBER CBDT			-					
3	CHIEF COMMISSIONER			-					
4	COMMISSIONER			-					
5	ADDITIONAL COMMISSIONER			-					
6	DEPUTY COMMISSIONER			-					
7	ASST COMMISSIONER(Sr.)			-					
8	ASST.COMMISSIONER (Jr)			-					
9	INCOME TAX OFFICER			-					
10	INSPECTOR			-					
11	DY. DIR/COMPUTER MGR			-					
12	ASSTT. DIR/SYSTEM ANANLYST			-					
13	PROGRAMMER GR A			-					
14	PROGRAMMER GR B			-					
15	DATA PROCESSING ASSTT. GR B			-					
16	DATA PROCESSING ASST. GR A			-					
17	DATA ENTRY OPERATOR GR D			-					
18	DATA ENTRY OPERATOR GR C			-					
19	DATA ENTRY OPERATOR GR B			-					
20	DATA ENTRY OPERATOR GR A			-					
21	DEPUTY DIRECTOR (OL)			-					
22	ASST. DIRECTOR (OL)			-					
23	HINDI TRANSLATOR			-					

C. SERVICE PARTICULARS

Sl.No.	RANK	DATE OF APPOINTMENT							
		D	D	M	M	Y	Y	Y	Y
24	CHIEF STATISTICAL ADVISOR			-					
25	DY. CHIEF STATISTICAL ADV.			-					
26	ASST. CHIEF STATISTICAL ADV.			-					
27	SAMPLING OFFICER			-					
28	ADDL. ASSTT. DIR.			-					
29	SUPERINTENDENT			-					
30	ASSISTANT			-					
31	SUPERVISOR (GR I)			-					
32	SUPERVISOR (GR 2)			-					
33	HEAD CLERK			-					
34	TAX ASST.			-					
35	UDC			-					
36	LDC			-					
37	NOTICE SERVER			-					
38	SR. PERSONNEL ASSTT.			-					
39	STENOGRAPHER, GR-1			-					
40	STENOGRAPHER, GR.-2			-					
41	STENOGRAPHER, GR.-3			-					
42	STAFF CAR DRIVER GR -1			-					
43	STAFF CAR DRIVER GR -2			-					
44	STAFF CAR DRIVER GR -3			-					
45	JAMADAR			-					
46	MULTI TASKING STAFF			-					

D. EDUCATIONAL PARTICULARS

SL. NO.	QUALIFICATION	YEAR	(To be filled by Degree/Diploma holders only) SUBJECTS (MENTION MAIN 3 SUBJECTS)	SPECIALISED SUBJECT (MENTION ONLY ONE)
1				
2				
3				
4				
5				

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED

E(a) TRAINING PARTICULARS (INDIA)

SL NO	1.NAME OF THE TRAINING / COURSE	YEAR (YYYY)	DURATION	
	2.NAME OF THE INSTITUTION		WEEKS	DAYS
1	1			
	2			
2	1			
	2			
3	1			
	2			
4	1			
	2			
5	1			
	2			
6	1			
	2			
7	1			
	2			

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED.

E(b) TRAINING PARTICULARS (ABROAD)

SL NO	1.NAME OF THE TRAINING / COURSE		YEAR	DURATION	
	2.NAME OF THE INSTITUTION		(YYYY)	WEEKS	DAYS
1	1				
	2				
2	1				
	2				
3	1				
	2				
4	1				
	2				
5	1				
	2				
6	1				
	2				
7	1				
	2				

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED.

F(a) EXPERIENCE PARTICULARS BEFORE JOINING INCOME TAX DEPARTMENT

SL. NO.		1. DESIGNATION	2. ORGANISATION	1. PLACE OF POSTING	2. NATURE OF JOB	FROM(F) TO TO(T); WRITE DATES										
						D	D	M	M	Y	Y	Y	Y			
1	1			1		F			-			-				
	2			2		T			-			-				
2	1			1		F			-			-				
	2			2		T			-			-				
3	1			1		F			-			-				
	2			2		T			-			-				
4	1			1		F			-			-				
	2			2		T			-			-				
5	1			1		F			-			-				
	2			2		T			-			-				
6	1			1		F			-			-				
	2			2		T			-			-				

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED.

F(b) EXPERIENCE PARTICULARS BEFORE JOINING INCOME TAX DEPARTMENT

SL. NO.	1. POST	2. DEPARTMENT	3. NATURE OF JOB	1. PLACE OF POSTING	2. CIT CHARGE	3. CCIT CHARGE	FROM(F) TO TO(T); WRITE DATES
							D D M M Y Y Y Y
1	1			1			F
	2			2			T
	3			3			
2	1			1			F
	2			2			T
	3			3			
3	1			1			F
	2			2			T
	3			3			
4	1			1			F
	2			2			T
	3			3			
5	1			1			F
	2			2			T
	3			3			

NOTE : PLEASE USE PHOTOCOPY OF THIS FORMAT IF MORE ROWS ARE REQUIRED.

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		-			-				
D	D		M	M		Y	Y	Y	Y

PHONE
