



LIMITLESS INSURANCE BROKING SERVICES PRIVATE LIMITED

Corporate office:603, 6th Floor, Maftalal House

HT Parekh Marg, Backbay Reclamation,

Churchgate, Mumbai:400020

CANDIDATE INFORMATION FORM

Date:

Post Applied For:

Candidate Full Name:

Date of Birth:

Address:

Contact No:

E- Mail:

Marital Status:

FAMILY DETAILS

Name	Relation with you	Profession	Age	Is dependent on you? Y/N

EDUCATION QUALIFICATION:

Standard	Board/ University	Main Subject	Year of Passing	Percentage



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Mumbai:400015

Total Years of Experience:

Last Salary Details:

Salary Expectation:

Your Strengths:

Your Weakness:

Why should we hire you?

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What are your achievements till date?

.....

How did you come to know about our organization?

.....

How soon you can join with our organization, if you get selected?

.....

Declaration

I certify that above information is correct & complete to the best of my knowlwdge and nothing has been concealed should I be found to have concealed any material information or given any details, my appointments shall be liable to be summarily terminated without notice or compensation.

Place:.....

Signature:.....

