NATIONAL INSURANCE ACADEMY

Annexure 1

PROFORMA FOR APPLICATION FOR THE POST OF CHAIR PROFESSOR (LIFE INSURANCE)

Recent passport size photograph

A) Personal Details

1. Name (in block letters) : ……
2. Employee No.: ……
3. Designation with Office and Place of Posting:……
4. Office Address (with Tel. No) : ……
5. (i) Date of Birth (DD/MM/YYYY): ……

   (ii) Age as on 1st December 2025 (completed years): ……
6. Gender: ……
7. Current Mailing Address (with Tel. No): ……

   ……
8. Permanent Residential Address: ……

   ……
9. Mobile No : ……Email Id: ……

B) Educational Qualifications:

10. (i) Academic (Graduation onward):

Examination Passed	University/ College/Board	Year of Passing	Duration of Course	Subjects taken	Percentage of marks

(ii) Professional:

Examination Passed	Examining Body	Year of Passing	Duration of Course	Subjects taken	Percentage of marks

11. Membership of Professional Associations:

(i) ……

(ii) ……

(iii) ……

12. Details of positions held:

From (MM/YY) To (MM/YY)	Position Held	Responsibilities handled (brief description)

13. Trainings attended: ……

……

……

14. Any other information you want to share:

……

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……

15. **Have you ever been convicted by a Court of Law? (please √)** **NO/YES***
(*please give details in separate sheet.)

16. **Statement of Purpose:** (How do you think you are suitable for the post applied for and how you propose to contribute in further development of the NIA - elaborate in not more than 400 words on a separate signed sheet titled **"Statement of Purpose")** :

17. Certification:

I _____ (insert full name), certify that the above information is correct to the best of my knowledge and belief.

I further certify that no disciplinary / vigilance proceedings are either pending or contemplated against me and that there are no legal cases pending against me.

There have been no major / minor penalty awarded against me.

..……

Signature of the Applicant

Date: ……

Place: ……