

Date: - _____

Photo No _____

ID Card No _____

Particulars to be filled by employees (in capital Letters) in the format as prescribed below: -

Sr. No	Particulars	Details
1.	Name of Employee	
2.	EMPID No	
3.	Designation	
4.	Date of Birth	
5	Date of Retirement	
6.	Residential Address	
7.	Blood Group	
8.	Telephone No/Mobile No	
9.	Date of Joining	
Reason for applying new I card		

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Signature of Employee

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