

LIC CARDS SERVICES LTD 6th Floor, Jeevan Prakash Building, 25, K G Marg, Connaught Place, New Delhi-110001

APPLICATION FOR ENGAGEMENT FOR CHIEF CARDS SERVICE ADVISOR (CCSA) (Clause 2(a), (b), (c), (d), (e), (f) and (j)

1.	Na	me in Fu	ıll (In	Eng	lish,	Cap	itals	with	Sur	nam	e Fir	rst)									
2.	Cu	rrent Ma	ailing	Add	lress	for	corre	spoi	nden	ce wi	ith P	in C	ode								
																		\Box			
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													Pin (Code	;						
3.	Perma	nent Ad	dress	with	Pin	Cod	e														•
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		Telephon																			
Mo	bile					E	-mail	id:													
4.	Date o	of Birth:																			
(Comple	eted Age	as on			_Yea	r		_Mor	ıth_		Days	S								
	_	_															7				
5.	5. Marital Status :		Married				Un-Married				Others										
6.	Fat	her's/Hu	ısbanc	d's N	lame	e :															
7.	Nat	ionality					:														
8.	E4	nastions	l One	lifia	otion	• • •															
o	S. Educational Qualifications: Examination Passed							Name of the Board/University								Year of Passing					
9.	9. Permanent Account Number (Pan No.))													
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10.	Dalik A	account 1	Details	S:- ((III W	inch	payı	пеп	ts wii	n be	mau	.e)									
	Name	e of A/c l	Holder	:/s																	
	Bank Name																				
	Bank Account Number																				
	IFS C	Code																			
	Bank	Address																			

11. Eligibil	ity for Ch	ief Ca	ard Service Ad	visor (please tic	k as per your	eligibility)				
a. If LI	C Agent									
	Corporate Club Member		Galaxy Club Member	CM Club Member	ZM Club Member	DM Club Member	CLIA	Chief Organisers		
Please Tick	1/10110	-								
IC Agency	y Code			No. of Year (in Membership)	Current Clu	b		•		
attached Bi	ranch]	LIC CLIA Code	(if Any)					
ttached Di	iv. Office			No. of Supervisapplicable)	sed Agents (f				
of LIC (CSL with	minin		(Eligible as per experience in so						
SR Cod	ام			No. of Credit Ca	ards Sourced i	n last 2 Financi	al Year			
SK Cou	ic		(1) F.Y			(2) F.Y	(2) F.Y			
of LIC	Emp		loyment	Experience of years		Post occupied		If LIC Agent Code no.		
_	F	rom	То	or years		_		Code no.		
3. Expecte 4. Any oth DECLARA I he besi	ed no of (ner Information: ATION: ereby declarate of my known and my known area.	CARD nation are than	es to be procused:	ervice Advisor (1) red in 1)First m ents made in this I understand the	s Application at in the even	2)Year: there in above a tof any inform	re true and	correct to the g found false,		
• I he to t	didature for ereby cons he Channe	or the ent tha el Part	applied post is lat details entere ner and authori	m found ineligitable to be canced therein the Appse an Employeens given by me in	elled/rejected a plication can b of the Channe	at any stage of r the basis for b I Partner to ent	ecruitment becoming a er the requ	referral entity ired details on		
Oate : Place :						(Signatu	re of the A	Applicant)		
Requireme	ents :-									
2. Self	ce)	Copy	of Address Pro	of (Voter card/D ition '11' i.e. age ik statement sho		-		-		