

## Annexure-A

### FORMAT OF APPLICATION FOR ACTUARIAL APPRENTICES

(Self-Certified photocopies of all relevant documents / certificates must be attached with application.)

To,  
National Insurance Company Ltd,  
Head office, Premises No. 18-0374, Plot no.CBD-81, New Town,  
Kolkata-700156.

Paste Photo  
  
Attested by a  
Gazetted Officer

I hereby submit my application for ACTUARIAL APPRENTICES as below:

1	Name	:	
2	Gender	:	
3	Date of Birth	:	
4	Father's Name/Husband's Name	:	
5	Present Address (For Correspondence)	:	
6	Permanent Address	:	
7	Category (UR/OBC/SC/ST)	:	
8	EWS	:	
9	PwBD (*)	:	
10	E-Mail ID	:	
11	Mobile No.	:	

(\*) Please mention category type

#### Qualifications:

Educational Qualifications (Class X Onwards):			
Examination Passed/ Degree Obtained	Board/University	Year of Passing	% marks (Aggregate)
Actuarial Exams*	IAI or IFOA (specify)	Year-Month of Passing	Remarks (if any)

\* The candidate should have passed or have been exempted from at least 3 actuarial exams conducted by Institute of Actuaries of India (IAI) or Institute and Faculty of Actuaries, UK as per curriculum 2019.

<b>Technical Qualifications (Software / tools etc.) if any:</b>	:	
---	---	--

**Employment details (all current and past companies) :**

Name & full address of employer(s)	Designation / post held	Period		Scales & pay drawn	Job Profile
		From	To		

**Candidate Declaration:**

I hereby declare that all the above information and statements made by me are true and correct to the best of my knowledge and belief. I understand that in case it is detected at any stage of engagement process that I do not fulfil the eligibility norms and/or that the information furnished by me is incorrect/false or that I have suppressed any material fact(s), my candidature will stand cancelled, irrespective of the result of the selection process. If any of these shortcoming(s) is/are detected even after my engagement as Actuarial Apprentice, my apprenticeship is liable to be terminated without any further notice. I also understand that in such circumstances, I will be liable to criminal prosecution.

Date:

Place:

\_\_\_\_\_  
Signature of Candidate

Name of the Candidate in full: \_\_\_\_\_