SBI General Insurance Company Ltd.

SBI General INSURANCE

www.sbigeneral.in

Sponsorship Form for Agents

All fields marked in * are mandatory

Application Date* D D M M Y Y Y Y

Source of Recruitment ☐ Retail ☐ SME

Preferred Exam Centre

SBI General Branch Code

Please paste passport size coloured photograph

Signature

PERSONAL INFORMATION

Applicant Name (Pl Tick)* ☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr.

FIRSTNAME MIDDLENAME SURNAME

Father/Husband Name* FIRSTNAME MIDDLENAME SURNAME

Category (Pl Tick)* ☐ SC ☐ ST ☐ OBC ☐ General

Area (Pl Tick)* ☐ Rural ☐ Urban

Pl give details of any one of the following

PAN-No.*

Driving License No.* OR Passport No.* OR

Voter Identity Card* OR Photo ID Card of Govt.*

Basic Qualification Detail* (Pl Tick) ☐ Class X (Rural) ☐ Class XII (Urban)

Board Name Roll Number Year of Passing

Educational Qualification* (Pl select from the list)

Date of Birth D D M M Y Y Y Y

Sex* ☐ Male ☐ Female

Primary Profession*

Nationality

Contact Information*

Current Address

House No.

Street/Road

Town/City

State

District

Pin Code

Phone No.

Mobile No.

E-mail ID

Permanent Address

(Please Note: Exam Centre will be selected on the basis of Current Address)

Version 1.1, April 2011

CURRENT LICENSE INFORMATION

a) Do you hold a license to act as an insurance agent? ☐ Yes ☐ No

If Yes, Licence Type ☐ Life ☐ General ☐ Composite

If yes, Name of the Life Insurer

Name of the General Insurer

Licence No. Issue Date D D M M Y Y Y Y Expiry Date D D M M Y Y Y Y

b) Are you engaged in any other insurance activity? ☐ Broker ☐ Referral ☐ Corporate agent ☐ Specified Person ☐ Others

c) Whether NOC provided? ☐ Yes ☐ No

Note: Educational Qualification -

- Associate/Fellow of Actuarial Society of India
- Associate/Fellow of Insurance Institute of India
- Associate/Fellow of Institute of Company Secretary of India
- Associate/Fellow of Institute of Chartered Accountants of India
- Associate/Fellow of institute of Cost & Works Accountants of India
- Graduate - Post Graduate - MBA - Class X - CLASS XII
- Other (Associates/Fellows of Indian Institutes of Bankers also included)

Authorized Signatory
(SBI General Insurance)

LIST OF DOCUMENTS REQUIRED FOR RETAIL AGENT

1. Pan Card copy
2. Address Proof
3. Education Proof
   a) Class XII for URBAN location
   b) Class X for RURAL location
4. KYC Form
5. Photo
6. Demand draft in Favor of SBI General Insurance Co. Ltd.
7. CIF
8. MBA/ CA/ CAIIB/ ICWA/ CS/ Associate or Fellow of Insurance Institute of India