Affix Your Recent Passport Size Colour Photograph

Post applied for Manager (Corporate Affairs) Trainee Secretary																						
No. WAP/5/807/2020-2021/Pers.																						
1. Name of C	andid	ate (as	rec	orde	ed in	ı M	atrio	cula	tion	or	equ	ival	lent	cer	tific	ate))	1				
2. Father's Na	me (a	s reco	rded	in l	Matı	ricu	latio	on c	or ec	uiv	aler	nt ce	ertif	ficat	e)							
3. Mother's Name (as recorded in Matriculation or equivalent certificate)																						
										-												
4. Sex		<u> </u>					l			5.	Re	ligi	on	l				l				
Male		F	ema	le								8-										
6. Marital Status (If married name of spouse) (Spouse Name & Nationality) Married Unmarried																						
7. a). Date of Birth b). Birth Place/District c). Birth State/UT D D M M Y Y Y Y C D D M M D D M M D D D M D D D D D D D																						
d). Nationality										e).	Me	othe	er T	ong	ue						
f). Age as on date (01/06/2020): Year Months Days																						
8. a). Domicile b). Blood group c). Identification Marks																						
O. Whathan hal		4																				
9. Whether bel	OBC	OBC	: (N	CL)		Mir	nori	fv	P	Н (%)	(0)	Н/\	/H/I	тн)	1		Ge	nera	al		
10. Languages			<i>y</i> (111	<u> </u>			1011	<u>., </u>	, .	.11 (.70)	(0)	<u> </u>	11/1	111)	<u>'</u>			1101			
Language				Re	ad				W	rite)				,	Spea	ak					
															\perp							

11.	Academic/Professional	l (Quali	ifications	:
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Sr. No.	Name of Examination	Year on Passi		Jniv./Board	Subjects	Marks obtained	% of Marks/CGPA	
2. H	Highest anal	ification acqui	red in Hi	ndi:				
		_						
	•						2020	
4. I	Experience (Please give det	ails there	eof, use separ	ate sheet if requ	ured) as on 01.0	06.2020	
Organization		Per	iod	Design	ation &	Scale of P	ay/ Gross	
		From	То	Descri	ption of Duties	Salary		
Γotal	Exp							
5. (Corresponde	nce Address:						
<i>J</i> . (corresponde	iice Address.						
				P	IN	Phone		
6. I	Permanent A	ddress:						
0. 1	CHIRATION 7	daress.						
				F	PIN	Phone		
17. l	PAN:							
	Aadhar No.:							
		nergency Cont	act No.:					
20. (Contact Mob	oile No.:						

- 20. Contact Mobile No.:
- 21. Valid Email ID:
- 22. Passport No.:
- Gurugram, amount of Rs from......Bank.
- 24. Any other information:

Information must be filled against each column clearly. In case incomplete application, the same will not be considered.

I solemnly declare that the above information is true/correct and I understand that in the event of the information found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Signature Date