HOOGHLY COCHIN SHIPYARD LIMITED Howrah - 711 109

	ATION FOR THE POST OF ACT BASIS	- -		ON		
To Sir contra details	Manager (HR & IR) Hooghly Cochin Shipyard Lin Howrah - 711 109 Ref: Your Advt. No	website.				
1	Full Name (as in Aadhaar)					
2	Father's Name					
3	Date & Place of Birth					
4	Aadhaar No					
5	Marital status					
6	Nationality					
7	Present Address (Postal)					
8	#Contact Details	E-mail address: Mobile No: Landline/Alternate Mobile No:				
9	Whether belonging to SC/ST/OBC/EWS*	,				
10	Disability (if any), Category and percentage of Benchmark Disability (VH/HH/OH/Others)*					
11	Languages known	To read	To write	To speak		

[#] Applicants should ensure that they enter valid e-mail ID and Contact Numbers (Mobile, Landline/Alternate Mobile Number) as all correspondence from HCSL will be through that e-mail ID/Contact Number only.

^{*}Copy of certificate to be attached.

12. Educational Qualification: (See item I in the advertisement)

Examination	Main Subjects	Name of College/ Institution	Year of passing	*Marks obtained/ Class & Rank	Medals/ Distn/ Awards of Merit

^{*}Please attach photocopies of mark sheets.

13. Experience:

Provide experience details starting from the present position and indicating previous employment in descending chronological order. Use separate sheet if required. Application will be rejected in case of incomplete information and without supportive documents.

	Post held and Organization	Period			Nature	Scale	Last salary	Reason
Sl No		From (dd/mm/yy)	To (dd/mm/yy)	Total (yr & months)	of duties	of pay	drawn in the post	for change

[#]copy of all experience certificates to be attached

14	Computer Literacy (Courses completed)		
15	Special Qualification/ Training##		
16	Do you have any relatives working in HCSL?	Yes/ No	If yes, details of relatives
17	Do you have any relatives retired from HCSL?	Yes/ No	If yes, details of relatives

##copy of certificates to be attached

I declare that the particulars furnished above are true and correct to the best of my knowledge and belief.

Place	:			Signature
Date	:			