**APPLICATION FOR POSITION OF ASSOCIATE (E8-LEVEL)FOR**

**RE-QA DEPARTMENT**

|  |  |  |
| --- | --- | --- |
| **S.No** | **DETAILS** | **PARTICULARS** |
| **1** | **NAME OF THE POST** |  |
| **2** | **APPLICANT’S NAME (Sh./Smt./Ms.)** |  |
| **3** | **FATHER’S / HUSBAND’S NAME (Sh.)** |  |
| **4** | **DATE OF BIRTH (dd/mm/yyyy)** |  |
| **6** | **CORRESPONDENCE ADDRESS** |  |
|  |
|  |
| **STATE:** | **PINCODE:** |
| **7** | **TELEPHONE NUMBER WITH STD CODE** |  |
| **8** | **MOBILE NUMBER** |  |
| **9** | **EMAIL ID** |  |
| **10** | **a. ORGANISATION FROM WHERE RETIRED** |  |
|  | **b. EMPLOYEE NO./ CODE IN ORGANISATION****FROM WHERE RETIRED** |  |
| **11** | **EDUCATIONAL QUALIFICATION** |
|  | **Qualification** | **Particulars** | **Subjects** | **Institute / University** | **%, or, CGPA** | **Passing Year** |
| A | **Graduation** |  |  |  |  |  |
| B | **Post Graduation** |  |  |  |  |  |
| C | **Others** |  |  |  |  |  |
| **12** | **WORK EXPERIENCE DETAILS (FILL ONLY THE APPLICABLE COLUMN)** |
| **I** | **TOTAL WORK EXPERIENCE** | **YEARS** | **MONTHS** | **DAYS** |
|  |  |  |
| **II** | **C**omplete details of service / position held since joining (separate sheet may be attached if required) |
|  | **Post Held** | **Organization Name with place of posting** | **Pay Scale/ Level** | **Period (From – To) dd/mm/yy – dd/mm/yy** |
| A |  |  |  |  |
| B |  |  |  |  |
| C |  |  |  |  |
| **III** | **BRIEF DESCRIPTION OF THE WORK EXPERIENCE (separate sheet may be enclosed if required)** |
|  |  |
| **IV** | **ANY OTHER RELEVANT INFORMATION (**DISTINCTION/AWARD/CERTIFICATE, etc.**)** |
|  |  |

I hereby declare that the particulars furnished above are true. I understand that my candidature will be cancelled, if, any information is found to be incorrect / false, at any point in time.

**Date: Signature of Candidate**

**Place Name:**

(Additional sheets may be enclosed if required)