IRCON INTERNATIONAL LIMITED

(Application form for the post of Assistant Manager/Elect. **on regular basis vide Advt. No. 13/2025)**

Please affix self-attested passport size photo here.

1. **Name in full** (In Block letters) : _____
2. **Father's Name** : _____
3. **Date of Birth (***DD.MM.YYYY***)** : _____
4. **Gender** (Male/Female/Others) : _____
5. **Community** : _____
   (UR /SC/ ST/OBC/EWS)
6. **PwD (Divyang) candidate**: Yes/No (If yes please enclose PwD certificate)
7. **J&K Domicile (between 01/01/1980 to 31.12.1989):** Yes/No
8. **Ex-Serviceman:** Yes/No (If yes please enclose certificate)
9. **Marital Status**: Married/Unmarried (If married, mention Spouse Name): _____
10. **Whether any working/worked employee of IRCON is in relationship/blood relation/nearly relation of applicant -**Yes/No (If Yes, please provide following details):

    Name: _____ Designation: _____

    Place of Posting: _____ Relationship: _____

    Nature of Employment: Regular/Contractual/Service Contract/Deputation/Tenure (please tick).
11. **Religion:** _____ 12. **Whether belong to Minority**: Yes / No
13. **Name of Present Organization**: _____

(Please tick)	Govt. (Central/State)	PSU	Auto. Bodies	Others

14 **Contact No.**: _____

E-mail ID: _____

15. **Demand Draft No. (If applicable)** _____ Bank Name _____ Date: _____
16. **Correspondence Address:** _____

_____

District: _____ **State:** _____ **Pin code:** _____

Country: _____

17. **Qualifications (Academic & Professional):**

Exam Passed	Year of Passing	Name of the Instt./ University	Max. marks	Marks obtained	Percentage of marks

18. **Post Qualification Experience: (From latest to first)**

Post held	Scale of Pay/CTC	Name & address of the Employer	P E R I O D			Brief detail of work handled (Attach separate sheet if necessary)
			From date	To date	Total Duration upto (in Yrs. & Months)	

My total length of post qualification work experience is _____ years _____ months and my current pay scale/CTC (if there) is _____ since _____ as on 01.05.2025.

19. **Details of Computer/ERP proficiency**: _____

20. **List of Enclosures**:

1.
2.
3.
4.
5.

Signature of the Candidate
(Name of candidate)

Declaration

I declare that the information furnished above by me is true to the best of my knowledge and belief and that nothing material has been concealed.

Date : _____ **Signature of the Candidate:**

Place : _____ **Name of candidate:**

Annexure-A

OBC CERTIFICATE FORMAT

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kumari.....son/daughter of ……. of Village/Town .....in District/ Division .....in the State/ Union Territory…….. belongs to the ..... community which is recognised as a Backward Class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. ……. Dated……*.

Shri/Smt./Kum.* ……..... and/or his/her family ordinarily reside(s) in the….....District/Division of the ……..... State/Union Territory. This is also to certify that he/she does not belong to the persons/sections (Creamy layer) mentioned in column 3 (of the Schedule to the Government of India, Department of Personnel & Training OM No. 36012/22/93-Estt(SCT), dated 8.9.1993 and modified vide Government of India, Department of Personnel and Training O.M.No.36033/1/2013-Estt. (Res) dated 27.05.2013 and 13.09.2017**.

Date:

DISTRICT MAGISTRATE /
DY. COMMISSIONER ETC.

(Seal)

*** The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate as OBC.**

**** As amended from time to time.**

Note: The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.