

(Application form for various posts in Co. Affairs discipline on regular basis vide Advt. No. 07/ 2025)

Post applied for: _____

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)

Please affix self-attested
passport size photo here.

6. **PwD (Divyang) candidate:** Yes/No (Please attach 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
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14. **Contact No.:** _____
E-mail ID: _____
15. **ICSI Membership No. :** _____ Fellow/ Associate (please tick)
16. **Correspondence Address:** _____

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

Country: _____

Advt. No. 07/ 2025

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 is _____ since _____ as on 01.04.2025.

19. Details of Computer/ERP proficiency: _____

20. List of Enclosures:

- 1.
- 2.
- 3.
- 4.

**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 : _____

Place : _____

Signature of the Candidate:

Name of candidate: