

Chief General Manager (HR Acquisitions) HR Acquisitions Department, FHQ Oil India Limited

## APPLICATION FORMAT

1.	Post applied for					
2.	Post code			Please affix your		
3.	Name in full (in capital letters)	A) First B) Midd		recent passport size coloured photograph		
		C) Surna	ame			
4.	Gender (please tick)	Male	Female Others			
5.	Date of birth (dd/mm/yyyy)	/_	/			
6.	Father's name					
7.	Mother's name					
8.	PAN No.					
9.	Nationality					
10.	Marital status					
11.	Aadhaar No.					
12.	Caste Category, As applicable Category (please tick)	A)	GEN SC ST OBC			
		B)	SC/ST/OBC Certificate No.			
			DATE:			
	I. Whether belongs to Non-Creamy Layer Category (NCL) (please tick)	Yes [	No			
		If Yes, NCL Certificate no				
		Date:				
	II. Whether belongs to Economically	Yes [	No			
	Weaker Section (EWS)	If Yes,	EWS Certificate no			
	(please tick)	Date:				

	I. Whether Persons with Benchmark Disabilities (PwBD) (please tick)	Yes No If yes, Disability certificate no.  Date:						
13.	II. If yes, please state the category of persons with disabilities (PwBD)	(as per advertisement, post identified suitable for PwBD for following:  a) HH b) OL, BL, CP, LC, Dw, AAV  c) MD involving (a) to (c) above				III. Percentage of disability (%):		
14.	I. Whether ex- Serviceman (please tick)	Yes No						
	II. If yes, following details  Date of Enrollment in Defence		Date of Discharge from Defence	Name of Zila Sainik Welfare Office		Registration No.	Date of Renewal	
	Educational qualification (as applicable)		College/ Institution/ University	Specialization/ Discipline		Year of passing	Percentage of marks obtained/ CGPA/division	
	Graduation							
15.	Post-graduation							
	Others (if any)							
	Any other academic details							
	Member of professional bodies		D : 1					
	Experience,	Name & address of organization	Position/ Designation & Grade held	Period of Service		Nature of duties	Place of posting	
	If any			From	То	duties		
16	I. For experience det	ails, please attach a separ Self-attested exper					ıgs.	
	II. Are you working in a Government Departments/ PSUs/ Autonomous Bodies as on 15/07/2025:			Yes No				
			Yes	No				
	III. If yes, do you have at least one-year experience PayScale of ₹80,000-2,20,000 (IDA) or in an equ			If Yes: Please Specify				
	PayScale or in a hig	-	Present Payscal	yscale to				
				Present Basic P				

17.	Permanent address (in block letters)	Name — C/O. (If any) –		
		Village /Town / Place –		
		P.O. –	P.S. –	
		District –	State –	
		PIN –		
18.	Present mailing address/correspondence address (in block letters)	Name – C/O. (If any) –		
		Village /Town / Place –		
		P.O. –	P.S. –	
		District –	State –	
		PIN –		
19.	Valid E-mail ID			
20.	Valid Mobile Number			

## **DECLARATION**

I hereby declare and certify that the particulars furnished in the application form hereinabove are true, correct and complete in all respects to the best of my knowledge and nothing has been concealed. In case any information provided by me is found to be incorrect, false, and misleading at any stage/time, I shall be fully responsible for the same and have no objection against the cancellation of my candidature without informing me. I shall have no claim against cancellation of my candidature or for appointment to the post and/or for any legal action against me, as deemed fit by OIL.

Date:	Name:	_
Place:	Signature of the applicant:	

Please enclose copy of following documents along with the application:

- 1. Self-Attested Copy of Birth Certificate or Admit Card/ Pass Certificate/ Marksheet of Matriculation/10th Standard or equivalent certificate indicating Date of Birth for Proof of Date of Birth.
- 2. Self-Attested Copy of Certificate(s) for Proof of Requisite Educational Qualification.
- 3. Self-Attested Copy of Certificate(s) for Proof of Relevant Post Qualification Work Experience.
- Self-Attested Copy of Certificate for Proof of Caste Category (SC/ST/OBC) in the Govt. prescribed format, as applicable.
- 5. Self-Attested Copy of Certificate for Proof of Non-Creamy Layer Category (NCL)/ Economically Weaker Section (EWS) in the Govt. prescribed format, as applicable.
- 6. Self-Attested Copy of Certificate for Proof of Disability in the Govt. prescribed format (If applicable).
- 7. Self-Attested Copy of Discharge Book/Service and Release Certificate for Ex-Servicemen (pages containing Personal Particulars and Service Particulars), as applicable.
- 8. Self-Attested Copy of Valid SAP Certificate(s).

Application in any other format will be summ	arily Rejected.