



BIO-DATA FORM

Advt. No.: C – HR (TA & CP)/ADVT. No.2023-6

Date of Walk-In Interview : _____

Name of the Post applied for: _____

Working in Govt. Organizations / PSU: Yes No

In case of 'Yes', whether applied through proper channel: Yes No



Please attach a copy of the forwarding letter of the employer or NOC at the time of Interview.

1	Name of the Candidate (as per X th Class certificate in capital letters)			
2	Date of Birth (DD/MM/YYYY)	AGE as on		
		(Date of Walk-in-Interview)		
3	Father's Name (as per your X th Class certificate) & Occupation			
4	Present Address (for correspondence)			
5	Permanent Address			
6	Phone No. / Mobile No.			
	Alternate Contact No.			
7	e-Mail ID (Mandatory)			
8	Nationality			
9	Religion			
10	Place of Birth & State			
11	Marital Status			
12	Specify the category you belong to (tick)	UR / EWS / OBC(NCL)/SC/ST		
13	Are you a Person with Benchmark Disability (PwBD). If yes, please specify the disability %	LAST RANK SERVED IN: _____ Yes <input type="checkbox"/> No <input type="checkbox"/> , If yes ____ % of disability & PwBD Category _____		
14	Are you an Ex-Servicemen (if yes, pl. specify no. of years of service)	Yes <input type="checkbox"/> No <input type="checkbox"/> No. of years: <input type="text"/>		
	Please tick on your branch in Defence Service	ARMY / AIRFORCE / NAVY		

Signature: _____

**BHARAT DYNAMICS LIMITED**

15. Educational Qualifications (Declare all the qualifications, which you possess and pursuing). Also, indicate period of gap in academics, if any, and reason for the break.

Sl. No.	Qualification Class onwards)	Subjects Specialization	/i. Period of Study (MM/YY)_To (MM/YY) ii. Total duration of the Course	University/ Institution & Address	Full Time / Correspondence / Evening classes/ Part Time	Month & Year Passing per certificate)	Percentage (%) of Marks secured (average of total marks obtained in all semesters/years)**	Course is Recognized by UGC / AICTE/ DEC / State Govt. / Central Govt. (please specify)
1.								
2.								
3.								
4.								

(Rows may be added if necessary)
* If CGPA/OGPA/CPI/DGPA or letter grade in a qualifying degree (Essential Qualification) is awarded, equivalent percentage of marks should be indicated as per norms adopted by the University/Institute and a documentary proof / certificate to this effect should be submitted by the candidate from the University/ Institute.

I hereby declare that I do not possess any other qualifications and also not pursuing any other course. I may be terminated without notice if Management found that I have concealed any higher qualification, which I have possessed before joining the Company and also pursuing higher qualification at the time of joining the Company (Please attach additional sheet, if required).

Signature: _____



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16. **Post/Designation wise & Company/Firm wise Experience details to be mentioned, if any** (Start from Present Employer/Company). Management Trainee/ Probationary Trainee/ Apprenticeship/ Training period, if any, during the course of employment, should be indicated separately.

S. No.	i. Name of the Organisation / Firm. ii. Address iii. STD code & Telephone No. iv. e-mail. (2)	Central / State / PSU / PSB / Private (3)	Designation / Post held (4)	i. Scale of Pay ii. Basic iii. DA iv. Gross Salary per month (in case of Private sector employees) (5)	Contract / Tenure / Permanent (6)	i. Provident Fund No., ii. Universal Account No. iii. EPF Office address (7)	Period of Service		Total Period of Service (Years - Months) (10)	Reasons for leaving (11)
							From (dd/mm/yyyy) (8)	To (dd/mm/yyyy) (9)		
1.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						
2.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						
3.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						

(Rows may be added if necessary)

Signature: _____



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(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
4.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						
5.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						
6.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						
7.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						

(Rows may be added if necessary)

I hereby declare that I have written correct experience details. I may be terminated without notice if Management found that I have concealed/ wrong experience details mentioned the above experience details column. **(Note:** If the post & Company wise experience details are more than 07 rows, please furnish the experience details in additional sheet(s)).

Signature: _____



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17. Experience details, if any, starting from the Present Employer /Company & **Present Post /Designation wise.**

Sl. No.	Name of the Company Office / Firm or Institution	Post held (Period-From dd/mm/yyyy To dd/mm/yyyy)	Nature of Duties for the said Post (Min. 100 characters & Max. 200 characters)
1.			
2.			
3.			
4.			
5.			
6.			
7.			

(Rows may be added if necessary)

Signature: _____



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18. Organisation Chart depicting Candidate Present Position / Designation, Roles & Responsibilities in the Present Organisation / Company only.

Name & Address of the Present Organisation / Office / Firm / Institution	
Organisation Chart depicting candidate Present Position / Designation in the Presenting Organisation / Company	
Role & Responsibilities of the Candidate in the Present Organisation.	

Signature: _____



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19	Present Pay particulars (Rs.) Scale of Pay (if applicable) a. Basic b. Dearness Allowance (if applicable) c. HRA d. Variable Pay (if any) e. Other (Pl. Specify) f. CTC (a+b+c+d+e) (Enclose copy of latest pay slip)	<u>Per Month</u> <u>Per Annum</u>
20	Any of your relative working in BDL (tick) (if yes, specify details)	Yes <input type="checkbox"/> No <input type="checkbox"/> NAME: Staff No.:
21	Have you ever attended for Interview for any post in BDL (if yes, please specify)	Yes <input type="checkbox"/> No <input type="checkbox"/> Name of the Post: Date when attended:

DECLARATION

I hereby declare that the information stated above by me is true, complete to the best of my knowledge and belief. In case, the information stated above by me is found to be false or incorrect, my candidature, appointment may be considered as revoked / terminated at any stage of recruitment process or after recruitment / joining.

Date: _____

Signature: _____

Place: _____

Name of the Candidate: _____

Enclosed: Copy of Educational / Technical Qualifications along with Marks Sheets, Category certificate, Experience Certificate, NOC (if any), etc.