

15. Educational/Professional Qualifications:

| S. No. | Qualification | University / Institute / College | Year of Passing | Division/ Grade |
|--------|-----------------|----------------------------------|-----------------|-----------------|
| 1 | Post-graduation | | | |
| 2 | Graduation | | | |
| 3 | XII | | | |
| 4 | X | | | |
| 5 | Diploma / ITI | | | |
| 6 | | | | |

16. Work Experience (add separate sheet, if required):

| S. No. | Organization | Designation | Duration | | Brief Profile |
|--------|--------------|-------------|----------|----|---------------|
| | | | From | To | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |

17. Total years of experience: _____

18. If selected, preference for location 1. _____ 2. _____ 3. _____

19. References:

| S.No. | Name | Address | Contact Number |
|-------|------|---------|----------------|
| 1. | | | |
| 2. | | | |

20. Languages known other than Hindi /English (Tick appropriate boxes)

| | Read | Speak | Write |
|----------|--------------------------|--------------------------|--------------------------|
| 1. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Note: Please attach self-attested photocopies of following documents with this form compulsorily:

1. Birth Certificate or 10th class certificate
2. Caste Certificate, if any.
3. Educational / Professional Certificates
4. Work Experience Certificates
5. PAN Card
6. Aadhar Card
7. Copy of EPF/ESIC Card (if already have)

Signature _____