



## BROADCAST ENGINEERING CONSULTANTS INDIA LIMITED

(A Govt of India Enterprise under Ministry of Information & Broadcasting)

(A Mini Ratna Company)

**Corporate Office:** BECIL Bhawan, C-56/A-17, Sector-62, Noida- 201307.

**Phone:** 0120-4177850, **Fax:** 0120-4177879 **Website:** [www.becil.com](http://www.becil.com).

**Regional office:** #162, 1<sup>st</sup> Cross, 2<sup>nd</sup> Main, AGS layout, RMV 2<sup>nd</sup> stage, Bangalore-560094

**Phone:** 080-23415853.

### **PROFORMA FOR APPLICATION**

Candidates working in Government organization and Central/State Public Sector Enterprises/Autonomous bodies will route their applications through proper channel. Advance copies of the application may however be sent directly to BECIL(RO), Bangalore.

**NOTE: PLEASE FILL APPLICATION FORM IN BLOCK LETTERS ONLY**

1.	Name of the post applied for		Paste Recent coloured photograph
2.	Name of the Candidate as per SSLC certificate		
3.	Father's Name		
4.	Permanent Address		
5.	Address for Communication		
6.	Current Office Address (if applicable)		
7.	Mobile No.		

8.	E-Mail ID for all communication	
9.	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/>
10.	Marital Status	Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Widow <input type="checkbox"/>
11.	Category (Please attach supporting documents) – SSLC certificate	Gen <input type="checkbox"/> OBC <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/>
12.	Whether belongs to (Please attach supporting documents)	PC <input type="checkbox"/> Ex-Serviceman <input type="checkbox"/> Minority <input type="checkbox"/> EWS <input type="checkbox"/>
13.	Date of Birth in words / Figures (Please attach supporting documents)	DD / MM / YYYY
14.	Age (As on date of publication of this Advt.)	years / months / days
15.	Details of Demand Draft a) Name of Issuing Bank b) Date c) Demand Draft No.	

16. Educational / Professional Qualification (High School Onwards)

<b>Exam Passed/ Degree obtained</b>	<b>Division/Grade and Percentage of Marks</b>	<b>Year of Passing</b>	<b>University / Institution</b>

17. Details of Employment / Experience in chronological order. (Use separate sheet to detail out your major contributions to the organization you have worked with).

S. N.	Post Held	Name of the Organization	Period		Total		Nature of duty/Experience (Enclose details with areas of specifications)	Pay Scale/ Salary drawn
			From	To	Year(s)	Month		

18. Details of Training courses attended if any. (Use separate sheet to detail out the contents of the trainings undergone).

S.No	Name of the Course	Institution & Place	Duration (Years & Months)

**I hereby declare that all the statements made in this application are true and compete to the best of my knowledge and belief.**

**Place:  
Date**

**Signature of the Candidate**

.....  
.....

**Through Proper Channel  
(To be filled by Department Concerned)**

It is certified that the particulars furnished above by the candidate have been scrutinized and found to be correct as per official records.

**(Signature & Designation of Competent Authority with Tel No. & Seal)**