

**Demand Draft No:** \_\_\_\_\_

Dated: \_\_\_\_\_ Fee: \_\_\_\_\_



BROADCAST ENGINEERING CONSULTANTS INDIA LTD

(A Govt. of India Enterprise)

**Head Office:** 14-B, Ring Road, I.P. Estate, New Delhi-110002

**Tel : + 91(11) 23378823-25, Fax No. + 91(11) 23379885**

Corporate Office: BECIL Bhawan, C-56, A/17, Sector-62, Noida – 201307 Uttar Pradesh

**Tel: 0120-4177850 Fax : 0120-4177879**

Website: [www.becil.com](http://www.becil.com)

Please attach  
recent passport  
size Color  
photograph

## **(REGISTRATION FORM)**

**(Imp: Please read the details on prescribed educational, professional as well as experience requirements for the various professionals before filling in the form) (FILLED FORM IN ONLY CAPITAL LETTERS)**

1. Application for the post of: \_\_\_\_\_

2. Candidate's Name - Mr.  Mrs.  Miss.  (Please tick the appropriate) \_\_\_\_\_

3. Father's Name: \_\_\_\_\_

4. Date of Birth:  Day  Month   Year

5. Aadhar No. (Compulsory) \_\_\_\_\_

6. Employee State Insurance No. (if any) \_\_\_\_\_

7. PAN No. (Compulsory) \_\_\_\_\_

8. Category: General  OBC  SC  ST  PH  EWS  OTHERS

9. Marital Status: Married  Unmarried  Widow

10. Nationality: \_\_\_\_\_ 11. Religion: \_\_\_\_\_

12. Permanent Address (Capital Letters):  
  
  
 City \_\_\_\_\_ State \_\_\_\_\_ Pin Code   
  
  
 City \_\_\_\_\_ State \_\_\_\_\_ Pin Code   
  
  
 City \_\_\_\_\_ State \_\_\_\_\_ Pin Code   
  
  
 14. E-Mail ID (Capital Letters):  
  
 Mobile No.1  Mobile No.2

**14. Educational/Professional Qualifications:**

| S. No. | Examination Passed      | Course Name & Board/University/Institute | Year of Passing | Total Marks | Marks Obtained | Percentage |
|--------|-------------------------|--|-----------------|-------------|----------------|------------|
| 1      | 10 <sup>th</sup> passed |  |                 |             |                |            |
| 2      | 12 <sup>th</sup> passed |  |                 |             |                |            |
| 3      | Graduation              |  |                 |             |                |            |
| 4      | Post-graduation         |  |                 |             |                |            |
| 5      | Diploma                 |  |                 |             |                |            |
| 6      | Others (if any)         |  |                 |             |                |            |

**15. Work Experience (add separate sheet if required):**

| S. No. | Organization | Designation | Duration          |                 |
|--------|--------------|-------------|-------------------|-----------------|
|        |              |             | From (DD/MM/YYYY) | To (DD/MM/YYYY) |
| 1.     |              |             |                   |                 |
| 2.     |              |             |                   |                 |
| 3.     |              |             |                   |                 |
| 4.     |              |             |                   |                 |
| 5.     |              |             |                   |                 |

**16. Total years of experience:** \_\_\_\_\_

**17. References**

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

**18. Languages known (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:**

1. Educational / Professional Certificates
2. 10<sup>th</sup> Certificate / Birth Certificate
3. Caste Certificate, if any.
4. Work Experience Certificates
5. PAN Card
6. Aadhar Card
7. Copy of EPF/ESIC Card (Previous employer-if applicable)