

## APPLICATION FORM (To be filled in block letters only)

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Pos	t Code					
Pos	t Applied for with Discipline					
1.	Name of the candidate in full (As per SSLC/ SSC Certificate)	:				
2.	Father's Name :					
3.	Date of birth: (DD/MM/YYYY)		Age :	YY	_ MM (a	as on 01.08. 2021)
	Gender: (Male / Indicate (tick) if you are a per		_			
7.	Nationality :		8. Religion	:		
9.	Aadhar Number:(Attach the self attested copy	of Aadhar card)				
10.	Correspondence Address:			nent Address:		
	City PIN C			P		 E:
12.	E-mail Id:(All correspondence will be n	nade to this email id	only)			
13.	FEE PAYMENT DETAILS (IF A	PPLICABLE) Note : A	ttach original	DD along with	applicat	tion
	DD Amt (Rs) DD	No DD D	ate	Bank Name _		

## **14. QUALIFICATION** (from SSLC / SSC onwards):

Qualification	Discipline	Class Secured	Year of Passing	Institution where studied	AICTE approved (Yes/No)
10 <sup>th</sup> Standard	NA				NA
12 <sup>th</sup> Standard					NA
Graduation					
Post –Graduation for the post of Project Engineer (M.Tech / MSc in Photonics/Optics)					

## 15. CONVERSION OF QUALIFYING MARKS:

(Attach the self attested copy of grade to mark conversion certificate)

Qualification	Semester	Semesters Maximum Marks	Semesters Marks obtained	Percentage (%)
	1 <sup>st</sup>			
	2 <sup>nd</sup>			
	3 <sup>rd</sup>			
Graduation	4 <sup>th</sup>			
	5 <sup>th</sup>			
	6 <sup>th</sup>			
	7 <sup>th</sup>			
	8 <sup>th</sup>			
	Total of All			
	Semesters			
Post –Graduation for the				
post of Project Engineer	Total of All			
(M.Tech / MSc in	Semesters			
Photonics/Optics)				

Note: 1. The candidates, if their University / institute following an evaluation systems like CGPA / DGPA / GPA / grading system, have to same to percentage (%) as per their university formula and the same shall be indicated above, The conversion certificate issued by university / Institute is to be Submitted along with application form, compulsorily.

2. Attach the self attested copy of mark sheets of all semesters.

**16. EXPERIENCE**: (Post qualification experience & most recent to be mentioned first)

Name of the Organization		Period ate)	Post Qualification Experience upto 01.08.2021		Designation	Cost to the Company CTC	Brief on duties & responsibilities / projects handled (use separate sheet for more details)	
	From	to	Years	Months				
Total Wok Exp	Y MM)							

**Note:** 1. Teaching experience will not be considered as 'Work Experience'.

2. Attach the self certified copies of the experience certificate/s with clear mention of all above details.

8.	Please give particulars of your rela	tive employed in	BEL, if any:				
	Name	Relationship	Designation	Depa	rtment	SBU / Unit	
	The check list of the following copapplication in the following order:	oies of the certifica	ates / documents so	elf – att	ested and	d attached to th	
SL	Copies	of Certificates		Y	Yes / No / Not Applicable		
L	SSC / SSLC Makes card as proof o	f Age					
2	Graduation Marks card ( All seme	esters)					
3	Graduation Final Degree Certifica	ite					
4	Conversion formula for conversion to percentage marks & awarded Institution, wherever applicable.						
5	Post -Graduation Marks Card (fo MSc in Photonics/Optics))	h /					
6	Post -Graduation Certificate (For MSc in Photonics/Optics))	n /					
7	Post Qualification work Experience						
3	Category Certificate (GEN / OBC , In case of OBC candidate -Valid						
9	No Objection Certificate (NOC) fr						
0	Any other certificates / Testimon the selection committee.	ials they you may	desire to place befo	ore			
0.	Hobbies/Special Interests :						

Date:

Place: SIGNATURE OF THE CANDIDATE

facts stated above, my candidature may be summarily rejected or my engagement be terminated.