To speak

# कोचीन शिपयार्ड लिमिटेड / COCHIN SHIPYARD LIMITED कोच्ची / KOCHI - 15

### <u>WALK-IN SELECTION - MARINE FACULTY / INSTRUCTOR ON CONTRACT BASIS</u>

#### **APPLICATION FOR THE POST OF** ......ON CONTRACT BASIS To Affix recent General Manager (HR) Cochin Shipyard Limited passport size Kochi - 682 015 photograph Sir Ref: Your advt No...... dated ...... on CSL website. I hereby apply for the post of \_\_\_\_\_\_ on contract basis in Cochin Shipyard Limited (CSL), Kochi furnishing the following details: Full Name (as in Aadhaar) 2 Father's Name Date & Place of Birth 3 4 Aadhaar No 5 Marital status 6 **Nationality** 7 Present Address (Postal) E-mail address: Mobile No: 8 **#Contact Details** Landline/Alternate Mobile No: Whether belonging to 9 SC/ST/OBC/EWS\* Disability (if any), Category and percentage of 10 Benchmark Disability

To read

To write

(VH/HH/OH/Others)\*

Languages known

11

<sup>#</sup> Applicants should ensure that they enter valid e-mail ID and Contact Numbers (Mobile, Landline/Alternate Mobile Number) as all correspondence from CSL will be through that e-mail ID/Contact Number only.

<sup>\*</sup>Copy of certificate to be attached.

## **12. Educational Qualification:** (See item I in the advertisement)

Examination	Main Subjects	Name of College/ Institution	Year of passing	*Marks obtained/ Class & Rank	Medals/ Distn/ Awards of Merit

<sup>\*</sup>Please attach photocopies of mark sheets.

## 13. Experience:

a) Give a Brief Description of Major Assignments handled.				

b) # Provide experience details starting from the present position and indicating previous employment in descending chronological order. Use separate sheet if required. Application will be rejected in case of incomplete information and without supportive documents.

Sl No	Post held and Organization	From (dd/mm/yy)	Period To (dd/mm/yy)	Total (yr & months)	Nature of duties	Scale of pay	Last salary drawn in the post	Reason for change

#copy of all experience certificates to be attached

14	Computer Literacy (Courses completed)		
15	Special Qualification/ Training##		
16	Do you have any relatives working in CSL?	Yes/ No	If yes, details of relatives
17	Do you have any relatives retired from CSL?	Yes/ No	If yes, details of relatives

##copy of certificates to be attached

J	declare	that	the	particulars	furnished	above	are	true	and	correct	to	the	best	ot	my
know	ledge and	belie	ef.												

Place :	Signature

Date :