ELECTRONICS CORPORATION OF INDIA LIMITED
HYDERABAD

RESUME FOR ENGAGEMENT AS TECHNICAL EXPERT IN ECIL, HYDERABAD						
NAME				Area of expertise		
Address for Correspondence				e-mail, Phone & Mobile		
DOB				AGE		
Experience:						
(a) In case of those who have retired (please give details starting from the last position held to the beginning of the career (if reqd. please attach separate sheet						
Name of the organisation	Designation of the post held and the position in hierarchy	Area of operations of the organisation	Period of service	Remuneration	Activities in Brief (If required attach a separate sheet)	Outstanding achievements
(a)(i)Details of the post retirement activities						
(b) In case of those in service (starting from the present placement to the beginning of the career						
Name of the organisation	Designation of the post held and the position in hierarchy	Area of operations of the organisation	Period of service	Remuneration	Activities in Brief (If required attach a separate sheet)	Outstanding achievements
(b)(i) In case you are chosen for the assignment, please indicate how do you plan to come out of your present assignment						

Academic and Research Accomplishments						
(a) Papers Published / Presented						
Title of the paper	Co-authors, if any	Dt. Of publication / presentation	Presented / Published in		Recognition or rewards, if any for the same	Remarks
(b) Research work carried out						
Name of the project	Brief description	Facilities / instruments / tools which were used in the research work	Other Scientists Associated	The outcome / deliverable of the project	The present status of the deliverable	
(c) Specialised training programmes attended						
Name of the programme	Organised by	Duration	Venue	Brief about the content		
Association with professional bodies						
Name & address of the body		Position held		Activities performed (seminars conducted, lectures delivered etc.)		Remarks
Qualifications (please give from the latest upto graduation level)						
Qualification	Institute	Year	Percentage	Distinctions, if any	Remarks	

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Please indicate, your proposed plan for undertaking the work in the area required by us (bringing out the linkage between your expertise and our requirement)			
Area	Proposed plan		
Preferred place of working		Remuneration expected	
References			
Details about the present status of health			
Any other information, which you would like to share			

Dated Signature:

Details of the enclosures:

To

Phone: Mobile

Email: