



**NBCC (INDIA) LIMITED**  
( A Government of India Enterprise )

Application No.....(to be filled by NBCC)						<b>Advt. No. 21/2021</b>				
1	<b>POST APPLIED FOR</b>			..... <b>(ON CONTRACT BASIS)</b>				Affix recent passport size self attested photograph		
2	<b>NAME (IN CAPITAL)</b>									
3	FATHER'S / HUSBAND'S NAME									
4	GENDER (Put a tick mark)	M	F	MARITAL STATUS (Put a tick mark) Married/ Unmarried/Others						
5	DATE OF BIRTH		<b>D</b>	<b>D</b>	<b>M</b>	<b>M</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>
6	<b>AGE AS ON CLOSING DATE OF RECEIVING APPLICATION</b>		<b>Years</b>		<b>Month</b>					
7			CATEGORY (Put a tick mark)		GEN	SC	ST	OBC (NCL)	EWS	EX-SEM
			<i>(Attach latest documentary evidence)</i>							
8	PHYSICALLY CHALLENGED		YES	NO	IF YES, STATE THE NATURE OF DISABILITY (OH/VH/HH/MD)..... <i>(Attach documentary evidence)</i>					
9	<b>ADDRESS</b> <i>(Please give full postal address with Postal Pin No.)</i>									
<b>MAILING</b>			<b>PERMANENT</b>				<b>FULL ADDRESS, CONTACT NO., FAX NO. &amp; E-MAIL OF PRESENT EMPLOYER, IF EMPLOYED</b>			
MOBILE NO. OF CANDIDATE			RESIDENTIAL TELEPHONE NO., OF CANDIDATE (IF ANY)				E-MAIL ID OF CANDIDATE			

10 <b>ACADEMIC AND PROFESSIONAL QUALIFICATIONS</b>						
Examination passed	Whether full time/ part time/ Correspondence	Duration of the course	Name of the institution	Name of the university	Month & Year of passing *	CGPA/OGPA/ Percentage of marks **

\* date of declaration of result / date of issue of final semester mark sheet/provisional certificate / degree, whichever is earlier will be considered as the date of passing the examination.

***(Please attach copies of pass certificates along with mark sheets of all above academic & professional qualification acquired.)***

\*\*If the marks are not in percentage, please provide the criteria of conversion into percentage of marks as per the guidelines provided by the University.

11 **DETAILS OF EXPERIENCE (in chronological order):**  
**POST QUALIFICATION EXPERIENCE.....(YRS.)**

S.No	Name & address of the employer	Post held	Period				Job description in brief	Pay scale / salary drawn
			From	To	Total			
					Years	Month		

***(please attach copies of experience certificates indicating clearly the date of joining and relieving of the posts along with proof of salary drawn)***

12 CERTIFIED THAT THE INFORMATION FURNISHED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE & BELIEF. IF AT ANY STAGE, ANY INFORMATION IS FOUND TO BE FALSE OR INCORRECT; MY APPLICATION WILL BE LIABLE TO BE REJECTED.

**Place:** \_\_\_\_\_ **Signature of the candidate**

**Date:** \_\_\_\_\_

**For Official Use**

Eligible

Not Eligible

Reason for Non Eligibility:.....