Affix recent colour passport

THE ODISHA MINING CORPORATION LTD

APPLICATION FORMAT FOR ENGAGEMENT OF ADVISOR (HEALTH AND SAFETY) ON PART TIME CONTRACT BASIS IN OMC LTD.

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2. Full Name (In capital)

1. Post applied for

3.	Father's	s/Husband's N	Name							
4.	Date of l (As reco		or equivalent exam) (Attach							
5.	Age as	on 30.06.2020	0							
6.	Sex:									
7.	Categor	y :								
8.	Marital s	status: (Marrie	ed/Un-married)							
9.	Address		resent Address	Perm						
	10.	Contact det	ails: (a) Phone (b) e-mail							
	11.	Qualification	n: (10 th onwards) (Attach copy	y of certificate	s).					
	SI. No.	Exam passed/ discipline	Name of the Board / University / Institute	Duration of course	Whether Regular course (Yes/No)	Year & month of Passing	Maximum marks	Marks obtained	% of Marks CGP/	s/
	_			_	 					_

(In case of CGPA/grades, please indicate equivalent percentage as per norms adopted by the University/ Institute & attach a copy of such norm fixed by the concerned University/Institute)

12. I dot addinioation Expendition (attach copy of continuation	12.	Post	Qualification	Experience	(attach co	ppy of certificates	;)
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SI. No.	Name & address of organizations worked	Post held	Scale of pay/CTC*	Basic pay		of rience 1/YYYY)	Total years & months of	Type of assignment handled/specific nature of work/duty
					From	То	experience	performed.

^{*} In case, current remuneration is in CTC format, please enclose the breakup as a separate annexure along with the application

	DECLARATION	<u>\</u>
ISon/Daughte	r / Wife of	, do hereby declare that all the statements
made in this application are true and correct to the	e best of my knowledge a	nd belief. In the event of any information being found false,
my candidature/appointment is liable to be cancel	lled/ terminated without ar	ny notice to me.
		(SIGNATURE IN FULL)
PLACE: DATE:	1	NAME:
Documents/Certificates Attached: -		
1) 2) 3) 4) 5) 6)		