

ANNEXURE

THE ODISHA STATE COOPERATIVE MILK PRODUCER'S FEDERATION LIMITED(OMFED)

APPLICATION FOR THE POST OF MANAGER(QUALITY CONTROL)

- 1) Post applied for :
- 2) Full name (in CAPITAL) :
- 3) Father's/ Husband's Name :
- 4) Date of Birth :
(As recorded in HSC or equivalent examination) (Attach copy of certificate)
- 5) Age as on 31.08.2022 :
- 6) Sex :
- 7) Category :
- 8) Marital status (Married/ Unmarried) :
- 9) Address with PIN Code :

Affix recent
colour passport
size photograph

Present Address

Permanent Address

.....
.....
.....
.....

- 10) Contact details
a) Phone :
b) Email :

11) Qualification & Certification (10th towards) (Attach copy of certificates):

Sl No.	Exam passed/ Discipline	Name of the board/ University/ Institute	Duration of course	Year & month passing	Whether regular course (Yes/ No)	Maximum marks	Marks obtained	% of Marks/ CGPA

(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) Post Qualification Experience (attach copy of certificates)

Sl No.	Name & address of the Organizations worked	Post held	Scale of Pay/ CTC	Basic Pay	Duration of experience		Total years and months of experience	Type of assignment Handled/ specific nature of work/duty performed.
					From	To		

Declaration

I..... Son/Daughter/Wife of.....,do hereby declare that all the statements made in this application are true and correct to the best of my knowledge and belief. In the event of any information being found false, my candidature/appointment is liable to be cancelled/terminated without any notice to me.

Place:
Date:

(Signature in Full)
Name:

Documents/ Certificates Attached:

- 1)
- 2)