



MECON LIMITED
(A GOVERNMENT OF INDIA ENTERPRISE)
RANCHI – 834002, JHARKHAND

APPLICATION FORM

Affix recent colored
passport size self
attested photograph

Advertisement No..... Dated:

| | | | | | | | | | | |
|---|---|---------|--------|--|--|---|--|------------------|---|-------------------------|
| 1 | POST APPLIED FOR | | | | | | | | | |
| 2 | NAME (IN CAPITAL) (As appearing in matriculation certificate) | | | | | | | | | |
| 3 | FATHER'S/ SPOUSE'S NAME | | | | | | | | | |
| 4 | GENDER (Put a tick mark) | Male | Female | Others | Marital Status (Put a tick mark) | | Married / Unmarried / Others (Please specify if Others) | | | |
| 5 | DATE OF BIRTH | D | D | M | M | Y | Y | Y | Y | NATIONALITY |
| 6 | Age (As on prescribed date in advertisement) | | | Year | | | Mont hs | | | Days |
| 7 | CATEGORY (Put a tick mark) | General | SC | ST | OBC (Non Creamy Layer) | (Attach documentary evidence) | | | | |
| 8 | Whether Person with Disability (Put a tick mark) | Yes | No | If Yes, State the nature of Disability (OH/VH/HH) (Attach documentary evidence) % of disability..... | | | | | | |
| 9 | Whether Ex Servicemen (Put a tick mark) | Yes | No | If Yes, indicate the following | | | | | | |
| | | | | Commissioned Officer | | Short Service Commissioned Service/Emergency Commissioned Officer | | | | |
| | | | | Indian Army | | Indian Navy | | Indian Air Force | | Others (please specify) |

| | | | | | | | |
|--|---|---|--|--|--|-------------------------------------|---|
| 10 | Whether Meritorious Sportsperson (Put a tick mark) | | Yes | | No | | |
| | If Yes, whether represented in the following ((Put a tick mark) | | | | | | |
| | International competition / sports | National competition / sports | Inter University competition / sports | State School Teams in National Sports by All India School Games Federation | Awarded National Awards in Physical Efficiency under National Physical Efficiency Drive. | | |
| | | | | | | | |
| 11 | Whether Domiciled in the State of Jammu & Kashmir during the period 01.01.1980 to 31.12.1989. (Put a tick mark) | | | YES | | NO | |
| 12 | ACADEMIC AND PROFESSIONAL QUALIFICATIONS (Starting from Matriculation) | | | | | | |
| | Name of Examination passed | Whether full time / part time/ correspondence | Duration of the course | Name of the Institution / University | Main Subjects/ Specialization | Month & year of passing * | Grade# / % marks & Class/ Division |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| <p>* Date of declaration of result/ date of issue of final semester marks sheet/ provisional certificate/ degree, whichever is earlier will be considered as the date of passing the examination. Please provide complete information. Use separate Annexure/sheet if required.</p> <p>#Equivalent % to be mentioned in bracket. (Please attach self attested copies of all certificates/ mark sheets)</p> | | | | | | | |
| 13 | Details of additional qualification(s)/training(s) undergone (if any) | | | | | | |
| | Name of qualification / Training Programme | Whether full time/ part time/ correspondence | Duration of the course/ Training programme | Name of the Institution/ University | Main Subjects / Specialization / Training content | Month & year of passing/ Training * | Grade# / % marks & Class/ Division (if any) |
| | | | | | | | |
| | | | | | | | |
| (Please attach self attested copies of all certificates/ Testimonials) | | | | | | | |
| #Equivalent % to be mentioned in bracket. | | | | | | | |

| 14 | MENTION DETAILS OF WORK EXPERIENCE AS APPLICABLE (IN CHRONOLOGICAL ORDER) | | | | | | |
|---|---|---|----|----------------------------|---|--------------------------|-----------------------------------|
| Name & address of the employer | Post held | Period | | | | Job description in brief | Pay Scale/ Salary drawn per annum |
| | | From | To | Total | | | |
| | | | | Years | Months | | |
| | | | | | | | |
| | | | | | | | |
| Note: Please attach self attested copy of experience certificate of each employer along with proof of salary drawn. Please attach Self Attested copy of experience certificate of each employer along with proof of salary drawn. You can also attach the details of your work experience in a separate Annexure/sheet. In case of Present employment attach a self attested copy of Appointment Letter containing Date of Joining & Grade/Level along with self attested copy of the latest pay slip. | | | | | | | |
| 15 | ATTACH A SEPARATE SHEET AS ANNEXURE GIVING BRIEF ABOUT ACHIEVEMENTS MADE IN THE PRESENT ASSIGNMENT (NOT EXCEEDING 200 WORDS). | | | | | | |
| | ADDRESS (Please give full postal address with postal pin no.) | | | | | | |
| FULL ADDRESS, CONTACT NO., FAX NO. & E-MAIL OF PRESENT EMPLOYER, IF EMPLOYED | | PRESENT ADDRESS OF THE CANDIDATE | | | PERMANENT ADDRESS OF THE CANDIDATE | | |
| | | | | | | | |
| MOBILE NO. OF CANDIDATE | | | | E-MAIL OF CANDIDATE | | | |
| DETAILS OF APPLICATION FEES, IF APPLICABLE | | | | | | | |
| DD NO | | AMOUNT..... | | | NAME OF BANK | | |

I hereby certify that the information provided above is true to the best of my knowledge and in case any information as above is found to be false or in-correct or suppressed at any stage, I understand that I am liable to be terminated from the services of MECON Limited forthwith without prejudice to any other legal and disciplinary action as deemed fit by the Management.

Place:
Date:

(Signature of the Applicant)

For Office Use Only

| Date of Birth verified | Educational Certificate(s) checked | Work Experience verified | Caste/Disability/Ex Servicemen/Sportperson Certificate verified, if any | Remarks |
|------------------------|------------------------------------|--------------------------|---|---------|
| | | | | |

Name :

Designation:

(Signature of Verifying Officer)