WAPCOS LTD. BIO DATA

Ref:- N0. 5/2(T/NT)/2020/Data Bank/Pers.

Application for maintaining data bank for the post of

1.	N	ame	e of	Car	ndid	ate	(as	reco	orde	d ir	n M	atrio	cula	tion	ı or	equ	iva	lent	cer	tific	ate)				
3.	Fat	ther	's l	Vam	e (a	s re	core	ded	in I	Aati	ricu	lati	on c	or e	quiv	aler	nt c	ertif	ica	te)						
4.	Mo	othe	r's	Nar	ne (as r	eco	rdeo	l in	Ma	tric	ulat	ion	or e	equi	vale	ent o	certi	ifica	ate)						
5.	Sex	ζ													6.	Re	ligi	on								
	ale	-					Fe	mal	le					1			8-									٦
			l St	atus	(If	mai					pot	ise)			-		(Sp	ous	e N	am	e &	Na	tion	alit	y)	_
Μ	arrie	ed					Uı	nma	rrie	d																
7.	a).	Dat	e of	f Biı	th:				ł)).	Bir	th F	Plac	e/D	istri	ct:				c)	B	Birth	n Sta	ite/	UT:	
Ι		D	М	Μ	Y		Y	Y	Y																	
d)	Na	tion	alit	v										e)	М	othe	er T	ong	me.							
u).	114	lion		· ·										•).	101	oun		ong	,ue.							_
f).	Age	e as	on	date	e (i.e	e. 01	/ 04	/202	20)	:Ye	ars_			Mo	nths			_Da	ys_		_					
8.	a).	Do	mic	cile	t). E	Bloo	d G	rou	р				c).	Iden	tifio	cati	on I	Mar	ks						

9. Whether belongs to :

SC	ST	OBC	OBC (NCL)	Minority	PWBMD (%)	General

10. Languages Known:

Language	Read	Write	Speak

11. Academic/Professional Qualifications:

Sr. No.	Name of Examination	Year of Passing	Univ/Board	Subjects	Marks obtained	% of marks

- 12. Highest qualification in Hindi: _____
- 13. Training received if any _____

14. Experience (Please give details thereof, use separate sheet if required) as on 01.04.2020

Organization	Per	iod	Designation & Description of Duties	Scale of Pay/ Gross Salary		
	From	То				

15. Correspondence Address:

PINPhone

16. Permanent Home Address:

PIN.....Phone.....

- 17. PAN No.:
- 18 Aadhar Card No.:
- 19. Guardian/Emergency Contact No.:
- 20. Contact Mobile No.:
- 21. Valid E.Mail ID:

22. Passport No.:_____ Valid up to_____

23. Any other information:

Information must be filled against each column clearly. In case incomplete application, the same will not be considered.

I solemnly declare that the above information is true/correct and I understand that in the event of the information found to be incorrect after my appointment, I shall be liable to be dismissed from service.