ಭಾರತ್ ಎಲಕ್ಟ್ರಾನಿಕ್ಸ್
भारत इलेक्ट्रॉनिक्स
BHARAT ELECTRONICS
HYDERABAD

APPLICATION FORM FOR THE POST OF STAFF NURSE
(To be filled in block letters only)

1. Name of the Candidate in full: _____
   (As per SSLC / SSC Certificate)

2. Father's Name: _____

3. Date of birth: (DD/MM/YYYY) _____ Age: _____YY_____MM (as on 31.03.2021)

4. Gender: _____ (Male / Female / Others)   5. Category: _____ (GEN / OBC / SC / ST / EWS)

6. Indicate (tick) if you are a Person with Disability: OH / VH / HH.   If yes, degree of disability _____ %

7. Nationality: _____ 8. Religion: _____

9. Aadhar Number: _____

10. Staff Nurse Registration Number: _____

11. Employment Exchange Registration Number: _____

12. Correspondence Address:
_____
_____
_____ PIN CODE: _____
Telephone No. : _____ Mobile No.: _____

13. E-mail Id :_____
          (All correspondence will be made to this email id only)

14. QUALIFICATION (from SSLC/SSC onwards):

Qualification	Discipline	Class Secured	Year of Passing	Institution where studied
10th Standard				
12th Standard				
Diploma in Nursing				
Any other Qualification / Certifications				

15. EXPERIENCE: (Post qualification experience & most recent to be mentioned first)

Name of the Hospital / Nursing Home	Employment details		Experience		Designation	Cost to the Company	Brief on duties & responsibilities *(Use separate sheet for more details)*
	From	To	Years	Months			
Total Work Experience (YY MM) as on 31.03.2021							

16. Please give particulars of your relative employed in BEL, if any:

Name	Relationship	Designation	Department	SBU/Unit

17. FEE PAYMENT DETAILS (IF APPLICABLE)

Challan No.	Date of Payment	Amount

18. The following copies of the Certificates are to be self-attested and attached to the application in the following order:

Sl.No.	Copies of Certificates	Yes / No / Not Applicable
01	SSC/SSLC Marks Card as proof of Age	
02	Final Diploma Certificate	
03	Diploma All Semester Mark Sheets.	
04	Staff Nurse Registration Certificate	
05	Local Employment Registration Certificate	
04	Conversion formula for conversion of CGPA / DGPA / OGPA or letter grade to percentage marks & awarded class, duly certified by the University / Institution, wherever applicable.	
05	Post Qualification Work Experience Certificate/s	
06	Category Certificate (GEN / OBC / SC / ST / PWD / EWS)	
07	No Objection Certificate (NOC), if the candidate working in PSUs / Govt. organizations	

UNDERTAKING

I affirm that the information given above is true and correct. I further undertake that, if at any stage, it is discovered that an attempt has been made by me to willfully conceal or misrepresent the facts stated above, my candidature may be summarily rejected or my engagement be terminated.

Date:

Place: **SIGNATURE OF THE CANDIDATE**