

## **BHARAT ELECTRONICS LIMITED**

## APPLICATION FOR THE POST OF SENIOR ASSISTANT FACILITIES OFFICER E-I

	Instructions: TO BE FILLED IN BLOCK	( LETTERS.				Affix your Recent Colour Photograph and Sign across the
1.	Full Name : (Mr./Ms.)	:				Photo
	(As per SSLC certificate)					
2.	Father's Name	:				
3.	Date of Birth (DD/MM/YYYY)	:	_Age:	YY	_MM (As on 01.	06.2024)
4.	Gender	: Male / Female	/ Others			
5.	Nationality	:				
6.	Category (General / OBC / SC / ST/ EWS	S) :				
	(Enclose Certificate in the prescribed form	mat)				
7.	a) Indicate if you are a Person with D	isability	:	Yes Yes	No No	
	If yes, indicate nature of Disability.		_			-
	(Enclose Disability certificate in the preso	cribed format)				
	b) Degree of disability as indicated in the	Certificate	:			_
8.	Religion: Hindu/Muslim/Christian/Sikh/Ne	o-Buddhist/ Zoro	oastrian/ O	thers (Pleas	se specify)	
9.	(a) Qualification (Indicate division & year	of passing)				

Education (SSLC onwards)	Institution/University	Main Subjects Studied	Class / Division	Grade / % of Marks	Year of Passing
10 <sup>th</sup>					
12 <sup>th</sup>					

# 10. Work Experience (As on 01.03.2024)

l.	Name of the Defence forces/ Paramilitary organization served: Army/ Air Force/ Navy/					
	Others (Please specify) :					
II.	Date of Joining Defence forces/ Paramilitary organization	:				
III.	Date of Discharge from Defence forces/ Paramilitary organization	ation :				
IV.	Total Service in Defence forces/ Paramilitary organization	<u>:</u>				
V.	Rank at the time of Discharge from Defence forces/ Paramilit	ary organization:				
VI.	Last Pay Drawn :		-			
VII.	Medical Category :					
VIII.	Trade :					
IX.	Any Other Work Experience					

Name of the		Employment Details		erience	Designation	Cost to Company	Details of responsibilities in
Organization	From	То	Years	Months	· ·	(In Rs.)	brief
Total Work Experien Months)	ce (in Years	and					

# 11. Details of relatives employed in BEL, if any

Name	Relationship	Designation	Department	Unit

12.	Address with Pin Code		
	a) Permanent Address		b) Correspondence Address
	Pincode:		Pincode:
c)	E-mail ID (in BLOCK LETT	ERS) :	
	(All correspondence will be	made to this email id only)	
d)	Mobile No.	:	
13.	Undertaking		
		discharge from	tion under DGR rules after discharge fromI have worked in the following
	In the event, the information notice. I further declare the willfully conceal or mis-rep	on is found to be false or incorre nat if any at stage it is discover	implete to the best of my knowledge and belief. ect; my candidature may be terminated without red that an attempt has been made by me to ay be summarily rejected or may employment ed.
Da	ite:		
Pla	ace:		SIGNATURE OF THE CANDIDATE

## **Checklist of attached documents**

SI. No.	Copies of Certificates	Yes / No / Not Applicable		
1.	SSC/SSLC Marks Card as proof of Age			
2.	Final Degree Certificate of qualifications			
3.	Copy of discharge book (All pages)			
4.	Experience Certificate			
5.	Service Certificate			
6.	Discharge Certificate			
7.	Last Pay Certificate			
8.	No Objection Certificate from current employer, if applicable			
9.	Any other certificates / testimonials (if any, may be attached)			