BELETHA	BEL-THALES Systems BEL-THALES Systems Limited CNP Area, BEL Industrial Estate, Jalahalli, Bangalore - 560013 NAME OF THE POST :					
	POST CODE	:				
1.	Name of the Candidate in full	:	_			
	(As per SSLC/SSC Certificate)					
2.	Father's Name	:	_			
3.	Date of Birth & Age	:	_			
4.	Gender	: Male / Female				
5.	Marital Status	: Married / Unmarried				
	If married, employment details of Spouse	e:	_			
6.	Nationality	:				
7.	Religion	:				
8.	Category	: General/EWS/SC / ST / OBC / P	WD			
	In case of PWD, Nature of Disability	: OH/HH/VH/Others				
		Degree of Disability%				
9.	Hobbies / Special Interests/Significant Ac	chievements:				

10. Address:

Permanent	Correspondence
Mobile Number:	Mobile Number: E Mail ID:

## 11. Educational background:

a) School

Exam/	Board	Year of	Main Subjects	Max.	Marks	Percentage
Degree		Passing		Marks	Obtained	of Marks
Х						
XII						

b) College

Degree & Discipline	Institution &University	Year of Passing		Percentage of Marks	Duration of Course

## 12. Post Qualification Industrial Experience (Start with the current)

(If required use additional sheets)

Name of the Organization	Emplov Det		No. of Years of Experience	Designati	Cost to the Company	Area of Work
organization	From	То	(YYMM)			

Total No. of Years of Experience (YYMM)				

13. Kindly provide a brief write-up on the roles & responsibilities of your present assignment. (If required use additional sheets)

14. Please give particulars of your relative employed in BEL/THALES, if any:

Name	Relationship	Designation	Department	Unit

15. SBI Collect Reference Number: \_\_\_\_\_\_

16. Enclosures: Tick the below mentioned photocopies of the documents that has been enclosed along with the application:

S No	Documents	Tick the box, if enclosed
1	Document for confirmation of Age/date of birth (SSC/SSLC marks card)	
2	Marks Cards of B.E./B.Tech/ CA / ICWA / CMA	
3	Final Degree Certificate B.E./B.Tech/ CA / ICWA / CMA	
4	Experience Certificates	
5	A separate write up mentioning the details of the post qualification experience	
6	SC/ST / PWD Certificate (if applicable)	
7	Online Payment Receipt	
8	No Objection Certificate (if applicable)	

## 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 wilfully conceal or misrepresent the facts stated above, my candidature may be summarily rejected, or my employment terminated.

Date:

Place:

Signature of the Candidate