# कोचीन शिपयार्ड लिमिटेड / COCHIN SHIPYARD LIMITED कोच्ची/ KOCHI -15

### प्रवेश चयन / WALK-IN SELECTION

## <u>APPLICATION FOR THE POST OF OPERATOR & DRIVERS ON</u> <u>CONTRACT BASIS</u>

सेवा में	/ To
	General Manager (HR & Training)
	Cochin Shipyard Limited
	Kochi – 682 015

Affix recent passport size photograph

Your adv CSL web		ΓRACT/Ex-Servicemen/2021/9 dated 20	December 2022 on
I hereby	apply for the post of	on contr	act basis in your
Compan	y furnishing the following det	ails:	
1	Full Name (as in Aadhaar)		
2	Father's Name		
3	Date of Birth & Age		
4	Aadhaar No		
5	Marital status		
6	Nationality		
7	Mention if Ex-servicemen or Ex-CAPF		
8	Period of Service		
9	Present Address (Postal)		

10	#Contact Details	E-mail address:		
		Mobile No : Landline/Alternate	e Mobile No:	
11	Whether belonging to SC/ST/OBC/EWS*			
12	Disability (if any), Category and percentage of Benchmark Disability (VH/HH/OH/Others)*			
13	Languages known	To read	To write	To speak

# Applicants should ensure that they enter valid e-mail ID and Contact Numbers (Mobile, Landline/Alternate Mobile Number) as all correspondence from CSL will be through that e-mail ID/Contact Number only.

### 14. Educational Qualification: (See Vacancy Notification)

Examination	Main Subjects	Name of College/ Institution	Year of passing	*Marks obtained/ Class & Rank	Medals/ Distn/ Awards of Merit

<sup>\*</sup>Please attach photocopies of mark sheets.

<sup>\*</sup>Copy of certificate to be attached.

#### 15. Experience:

a)	Give a Brief Description of Major Assignments handled.

b) # Provide experience details starting from the present position and indicating previous employment in descending chronological orders. Please use separate sheet if required. Application will be rejected in case of incomplete information and without supportive documents.

	Period					Last		
Sl No	Post held and Organization	From (dd/mm/yy)	To (dd/mm/yy)	Total (yr& months)	Nature of duties	Scale of pay	basic pay drawn in the post	Reason for change

#copy of all experience certificates to be attached

16	Computer Literacy (Courses completed)		
17	Special Qualification/ Training##		
18	Do you have any relatives working in CSL or any of its units/ Subsidiaries?	Yes/ No	<u>If yes, details of relatives</u>
19	Do you have any relatives retired from CSL or any of its units/ Subsidiaries?	Yes/ No	If yes, details of relatives

##copy of certificates to be attached

दिनांक / Date:

मैं घोषणा करता हूं कि ऊपर दिया गया विवरण मेरी जानकारी और विश्वास के अनुसार सत्य और सही है।
I declare that the particulars furnished above are true and correct to the best of my knowledge and
belief.
स्थान / Place:

हस्ताक्षर/Signature