



नेयवेली लिग्नाइट कार्पोरेशन लिमिटेड

NEYVELI LIGNITE CORPORATION LIMITED

(भारत सरकार का 'नवरत्न' उद्यम/'NAVRATNA' - A Govt. of India Enterprise)

पी.ओ. नेयवेली / P.O NEYVELI – 607 801, कडलूर जिला / Cuddalore District, तमिलनाडु / Tamil Nadu

(Regd. Office: First Floor, No.8, Mayor Sathyamurthy Road, FSD,
Egmore Complex of FCI, Chetpet, Chennai – 600 031)

फैक्स नं. / Fax No. : 04142-252645, 252646 : ई-मेल / E-Mail: online.recruitment@nlcindia.com

APPLICATION FORM

Advertisement Number: 06/2016

Name of the Post : INDUSTRIAL TRAINEE (FINANCE)

Affix color
passport size
photograph

(Use Block Letters)

1. Name in full

2. Father's Name

3. Mailing Address of the applicant

| Description | (a) Permanent | (b) Present |
|-----------------------------|----------------------|----------------------|
| in case C/o | | |
| House No./Room No./Plot No. | | |
| Street Name | | |
| Area / Locality / Nagar | | |
| Village / Town / City | | |
| Taluk | | |
| District | | |
| State | | |
| Pincode | <input type="text"/> | <input type="text"/> |
| Contact Number(s) | | |
| Nearest Railway Station | | |

(c) email : @

4. Date of Birth
(Enclose documentary evidence in support of it)

| | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| D | D | M | M | Y | Y |

Age as on 01/06/2016 : ____ Years ____ Months ____ Days

5. (a) Community :

| | | | |
|----|----|-----|----|
| SC | ST | OBC | UR |
|----|----|-----|----|

(b) Sub-Caste (Attach documentary evidence in case of SC / ST / OBC) :

(c) Religion :

(d) Nationality :

By Birth / Domicile

6. Recognised Educational / Other Professional Qualification(s)

| Name of the Exam | Month & Year of Passing |
|------------------|-------------------------|
| | |
| | |
| | |
| | |

7. Details of Training

| Institution in which training was obtained with duration and year of Training | Nature of Training | Remarks |
|---|--------------------|---------|
| | | |

8. Membership of Professional Institutions, if any,

- | | |
|----|----|
| 1. | 3. |
| 2. | 4. |

9. Languages Known

| Language Name | Speak | Read | Write |
|----------------------|-------|------|-------|
| (a) Mother Tongue | | | |
| (b) Other Languages: | | | |
| i) | | | |
| ii) | | | |
| iii) | | | |

10. Marital Status (Please put ✓ mark) : Married / Single / Widower / Widow

11. Are you related to any employee of NLC? : Yes / No

(Father, Mother, Sister, Brother or any relative)
If Yes, details of the related employee

| | | | |
|--------------|---------|---------|---------|
| Name | | | |
| Relationship | | | |
| CPF No. | | | |
| Status | Serving | Retired | Expired |

12. Have you been a candidate for any other post in NLC before? If so, furnish details.

13. Any other information including extra curricular activities (NSS, NCC, Sports, Cultural and Literary) etc.

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14. References: Please furnish below names of two persons not related to you, to whom reference could be made regarding your character and antecedents.

| | | | |
|-------------|-------|------------|-------|
| i) Name | _____ | ii) Name | _____ |
| Position | _____ | Position | _____ |
| Address | _____ | Address | _____ |
| Tel. No. | | Tel. No. | |
| Telex / Fax | | Telex/Fax. | |

I hereby declare that all the above information furnished by me are true and complete. I am aware that furnishing of false / incomplete information will result in loss of employment at any stage.

I also undertake to notify any changes in the information furnished within 7 days of such change.

Place:

Date:

Signature of the applicant

Note:

1. *If the space provided in any column is insufficient, separate sheets may be attached.*
2. *Mention exact dates wherever required*
3. *Attested photostat copies of certificates in support of the information provided should be enclosed along with this application form.*