MP INDUSTRIAL DEVELOPMENT CORPORATION LIMITED

"APPLICATION FORMAT"

1. PERSONAL DETAILS: -

| APPLICANT'S NAME | :- |
|----------------------------|----------------|
| FATHER'S/HUSBAND'S NAME | :- |
| GENDER | :- |
| NATIONALITY | :- |
| CATEGORY | ; - |
| DATE OF BIRTH (DD/MM/YYYY) | 1:- |
| E-MAIL | :- |
| MOBILENO. | : - |
| NAME OF THE POSITION/ROLE | :- |

2. ADDRESS DETAILS: -

| COMMUNICATION ADDRESS | |
|-----------------------|--|
| PERMANENT ADDRESS | |

3. EDUCATIONAL QUALIFICATION: -

| NAME OF CERTIFICATE DEGREE | PASSING YEAR (YYYY) | UNIVERSITY/ BOARD | INSTITUTE/ COLLEGE NAME | MARKS OBTAINED PERCENTAGE (IN 00.00 FORMAT) |
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4. EXPERIENCE DETAILS: -

| NAME OF THE ORGANISATION WORKED WITH | NAME OF THE POST HELD | FROM DATE (DD/MM/YYYY) | TO DATE (DD/MM/YYYY) | DURATION (YEAR MONTH) | COST OF PROJECT |
|--|-----------------------------|---------------------------|----------------------|--------------------------|--------------------|
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5. DOCUMENT SECTION: -

| S.NO. | DOCUMENT NAME | ATTACHED AS ANNEXURE |
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6. ANY OTHER RELEVANT SPECIFIC INFORMATION (IF ANY): -

7. DECLARATION: -

I HEREBY DECLARE THAT ALL THE INFORMATION GIVEN IN THE AFOREMENTIONED APPLICATION FORM IS TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERTAKE AND ACCEPT THAT IF ANY OF THE INFORMATION GIVEN BY ME IS FOUND TO BE INCORRECT, THEN MY APPLICATION WILL BE REJECTED AND IF APPOINTED, THEN MY APPOINTMENT WILL BE TERMINATED AND ACTION MAY BE TAKEN ACCORDINGLY.

DATE: -

PLACE: -

SIGNATURE OF APPLICANT