ಭಾರತ್ ಎಲೆಕ್ಟ್ರಾನಿಕ್ಸ್
भारत इलेक्ट्रॉनिक्स
BHARAT ELECTRONICS

APPLICATION FORM FOR C.C.C.Op-C
(To be filled in block letters only)

Affix recent passport size colour photograph here & sign across the photo

1. Name of the candidate: _____

2. Father's Name: _____

3. Date of birth: _____Age as on 01.01.2016:____years_____month_____ days

4. Gender: _____

5. Nationality: _____ 6. Religion (Please specify) : _____

7. Category: _____(General/OBC/SC/ST/PWD), if PWD: OH / VH / HH % of disability___

8. Marital Status: _____

9. Contact details:

PERMANENT ADDRESS:	POSTAL ADDRESS: *(All official correspondence will be sent to this address only)*
……………………………………..	……………………………………………
……………………………………..	……………………………………………
……………………………………..	……………………………………………
……………………………………..	……………………………………………
PIN CODE: ……………………………	PIN CODE: ………………………………....

Telephone No. : _____   Mobile No.: _____

e-mail ID : _____

10. Qualification details:

Qualification	Discipline	Aggregate percentage	Year of Passing	School/Board/Institution where studied
SSLC/SSC/ISC				
PUC				
B.Com.				
Others				
Knowledge in Computer Operation:				

11. Experience: (most recent to be mentioned first, use additional sheets if required)

Name of the organization	Employment details		Designation	Last Salary drawn (Rs.)	Nature of work
	From	To			

12. Please give particulars of your relative /s presently / previously employed in BEL, if any:

Name	Staff No.	Designation	Department	Unit	Relationship

13. Have you appeared for any previous selection for appointment in BEL? If so, please furnish the details:

Name of the post for which applied / appeared	Year of appearing

14. Application fee details:

Journal No. _____ Date: _____

15. Language in which you want to take the written test: English ☐   Hindi ☐

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

Date:

Signature of the candidate

Place: