

WAPCOS LTD.

BIO DATA

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|--|
| Affix Your Recent Passport Size Colour Photograph |
|--|

1. Post Applied for:

2. Name of Candidate (as recorded in Matriculation or equivalent certificate)

| | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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3. Father's Name (as recorded in Matriculation or equivalent certificate)

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4. Mother's Name (as recorded in Matriculation or equivalent certificate)

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5. Sex

| | |
|------|--------|
| Male | Female |
|------|--------|

6. Marital Status (If married name of spouse)

| | | |
|---------|-----------|--|
| Married | Unmarried | |
|---------|-----------|--|

(Name of Spouse)

7. a) Age as on 13.05.2014 (i.e. date of release of advertisement)

Year _____ Months _____ Days _____

b) Date of birth:

| | | | | | | |
|------|-------|------|--|--|--|--|
| | | | | | | |
| Date | Month | Year | | | | |

8. Whether belongs to :

| | | | | | |
|----|----|-----|---------------------------------|--------|---------|
| | | | | | |
| SC | ST | OBC | Minority(Christian/Muslim/Sikh) | PWD(%) | General |

9. Educational Qualification :

| SR. No. | Name of Examination | Year of Passing | Univ/Board | Subjects | Marks obtained | % of marks |
|---------|---------------------|-----------------|------------|----------|----------------|------------|
| | | | | | | |
| | | | | | | |
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| | | | | | | |

10. Technical Qualifications:

| Sl. No. | Name of Examination | Year of Passing | Univ/Board/Institute | Subjects | Marks obtained | % of marks |
|---------|---------------------|-----------------|----------------------|----------|----------------|------------|
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11. Highest qualification in Hindi:

12. Training received if any

13. Experience (Please give details thereof, use separate sheet if required)

| Organization | Period | Designation & Description of Duties | Scale of Pay/Gross Salary |
|--------------|--------|-------------------------------------|---------------------------|
| | | | |
| | | | |
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| | | | |

14. Correspondence Address:

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| |
| |
| |
| PIN... |

15. Permanent Home Address :

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| |
| |
| |
| PIN... |

16 Contact Landline Phone No.(with ST Code)

17 Contact Mobile Phone No.

18 Valid E.Mail ID:

19 Any other information

Information must be filled against each column clearly. In case incomplete application, the same will not be considered.

I solemnly declare that the above information is true/correct and I understand that in the event of the information found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date

Signature