

# **BHAGYANAGAR GAS LIMITED**

(A Joint Venture of GAIL (India) Ltd. & HPCL)

#### APPLICATION FOR EMPLOYMENT

SI.No.

Γ	
	Please affix your Passport size Photograph
Name of the post:	
Pay Scale: Rs	
PERSONAL DATA	
1. (i) Category: SC ST OBC OH VH HH	XSMN
(Tick in appropriate box if applicable)	
(ii) Name :	

Registerd office : 2<sup>nd</sup> Floor, Parishrama Bhavan, APIDC Building, Basheer Bagh, Hyderabad-5000 04

	iii) Father's / Husband's Name:	
	Occupation;	
2.	(i) Present Postal Address:	
	(ii) Telephone No. : Office/Resi	
	(iii) Telegraphic Address/ Telex No. If any.	
	(iv) Permanent Address:	
	v) Home town:	
3.	(i) Date of Birth:	
	(ii) Exact Age: Year Months	
	(iii) State to which you belong:	
	(iv) Nationality: (v) Religion:	
4.	(i) Height: cms. (ii) Weight: Kgs.	
	(ii) Power of Glasses if used:	
	Right Left	
	(iii) Do you suffer from any major ailment (e.g., Heart disease, T.B., Cancer etc.)? Yes / No	
	If yes, give details:	
5.		
	Also attach attested copy of Certificate from prescribed authority:	
6.	Incase Physically handicapped, give details of physical defects. Also attach attested copy of Certificate from competent medical authority.	
7	In case Ex-Serviceman state:	
	(i) Rank (ii) Corps/ Regiment No (iii) Date of Commission (i v)Date of Discharge (v) Date of start of pre-commission training, if any (vi) Education of Military,	
8.	(a) Sex: Male/Female (b) Marital status: Single/Married/Widowed/di	vorcee

## (c) Details of Children:

S.N.	Name	Ago	e	Sex	Class in which studying
1.					
2.					
3.					
	) Details of other Dependants	if any:		,	•
S.N.	Name	Age	Sex	Relationship	Remarks
1.					
2.					
3.					
4.					
5.					
(e)	Is Your spouse employed?				
	If so, give details of the orga	anisation and	place of post	ting etc.	Yes / No

## ACADEMIC & PROFESSIONAL QUALIFICATION

	s of Academ	ADEMIC  nic & Profess  qualification	ional Qual	ifications (N	/atricula	ition			ion
Examination/ Degree passed	College/ Institution	Year of Joining	Year of Leaving/ passing	Board/ Univer- sity	Class Divisi obtain	on	% of marks obtained	main subjects studied	Remarks
10. Details of	Membershi	p of Profession	onal Bodies	s/ Institutes/	Associa	tions	s, if any		
Status of Membe		Institution/ Association		Year of Enro	olment	by	ether recogn Govt. of Ind ivalent to D	lia as aw pegree pas pre	nether arded after asing ascribed am.

		Languages	Can read		Can w	rite	Can speak
Mother Tong	ue						
Other languag	ges						
1.							
2							
3.							
4							
		Trainin	ng & Attain	ments			
12. Detai	ls of Training	/ Apprenticeship etc.:	:				
S.No.	Name of Institute o Employer		From	Т	O	Examination passed if any	Pay/ Stipen if any
	1	PARTICU	LARS OF EX	PERIE	NCE	l	l
13. T	otal Experienc	ce	Vears			Months	

14 in c	. Details of each organ	f experience s isation with d	tarting f lates:	rom prese	ent with scales.	Please g	give deta	ils of d	ifferent position	ons held
Employer's Name & Complete address (start from		Period of Employment		ation	Designation and scale of pay	Basic Pay	Total Emolument		Exact nature of duties/functi ons	Reason for leaving
present employer)	From Date	To Date	Year	Month						
15. (a) D	etails of Sa	alary being dr			AL INFORMA		annlica	tion:		
				ate of			ial Pay,	DA/A	ADA	Tatal
Scale of pay	Date	e of entry in the scale		ext rement	Basic Pay		any	/ VI		Total
	1									
L										

(b) Other allowances	s and Perks:				
CCA Site/Project/ Construction Allowance		Annual Bonus %	Approx. monthly value of incentive bonus, if any	Value of other Perks e.g. free house/ electricity / Water etc.	Gross emoluments per month inclusive of all allowances and value of perks
16. If retired from pensionary 17. (a) Basic Pay a		7		nsion/equivalent of	ed
	ed to serve anywher		Yes/ No	. ,	
19 Have you been a If 'yes' Giv	an applicant for any we the following det		s Company be	efore? Yes/No,	
Employment Advertisement No.	Name of Pos		called, date f interview	Whether selected/ offered appointment	Remarks

instituted agains	ling mii st you o	nor traffic viola r have you bee	ation) or n barred	is any discip / disqualifie	ed, fined or imprisolinary / vigilance d by a Public Serving in its examination	case price Co	pending/ever ommission
Yes / No							
If yes, give deta	ails:						
21. Are you rel	ated to	any of the Dire	ectors of	BGL? Is an	y of your relatives	empl	oyed in BGL.
If 'Yes' give the	follow	ing details:			Y	es / N	(o
Name		Designation		Place of P	osting	Rel	lationship
22. Have you eve	er been	abroad? If so, ş	give par	ticulars:			
Country visited	Date o	f Departure	Date of	f Arrival	Duration of Sta	У	Purpose of visit

<ul><li>23. Extracurricular Activities:</li><li>24, Details of Research Works, Books / Papers etc. Published, if any</li></ul>									
25. References: (These persons should be r should be intimately acquainted to the should be acquainte	esidents of India and holder of resp with your character and work but r	ponsible positions and they must not be relatives)							
Name	Address	Occupation or Position							
26. Any other relevant details/ information not covered above, that you may wish to furnish									
27. List of documents attached (True copies)									

I certify that	
(a) The information furnished above is correct.	
(b) I am / am not employed in Govt. /Statutory Organisation /Public Sector U	Indertaking
(c) My application has / has not been forwarded through proper channel.	
(d) 1 am ready to join BGL after resigning the post / retaining protective lien my present post in Government / Public Undertaking.	on
Delete whichever is inapplicable.	
Date Signa	ature of Applicant
FOR OFFICIAL USE ONLY	
The entries regarding age, qualifications etc. made above have been verified by found correct. The following Degrees/Certificates/Testimonials have not been processed in the contract of the	
Re	presentative of HRD Deptt.

#### INSTRUCTIONS FOR FILLING THE APPLICATION FORM

Kindly make sure that all the instructions given below are complied with failing which your application is liable to be rejected.

- 1. All entries in this form should be typed or written neatly.
- 2. Submission of this form involves no commitment on either side and no correspondence with regard to the suitability or otherwise of the applicant will be entertained.
- Application forms from employees of Government/Public-Sector Undertaking/Statutory Organizations must be sent through proper channel.
- 4. Incomplete application will not be considered.
- 5. Attested copies and testimonials should be attached with the form, if not already sent All enclosures to the application form should preferably be of the size of application form and all the sheets be properly stitched or tagged. Original Degrees and testimonials should not be sent.
- 6. All the information given in the application form should be correct. Any mis-statement / Suppression of facts would render the candidate liable to rejection and termination after appointment.
- 7. Any change in address should be communicated to us. While every care would be taken to record the change in address, the Company will not accept any responsibility, whatsoever, for delivery of interview letter on changed address. The candidates should, therefore, arrange for redirection of communications to their changed address.
- 8. A recent passport size photograph should be affixed on the application form.