

TICEL BIOPARK LIMITED

CSIR ROAD, TARAMANI, CHENNAI: 600 113.

FIX
PHOTO

Post Applied For

Prefer Location (Pl. ✓)

CHENNAI

COIMBATORE

PERSONAL DATA

1 Name in full
(in Block Letters)

2 Address for communication

Phone No.
Mobile No.
E-mail ID:

3 Permanent Address

Phone No.

4 Place of Birth

5 Date of Birth

6 Age

years

7. EDUCATIONAL DATA: EDUCATIONAL & PROFESSIONAL (attested certificate to be enclosed)

Name of the Qualification	Name of the School / College	Name of the University /Institute	Examinations passed with month / year	Special subjects	Division & % of marks

8. EMPLOYMENT DATA (CANDIDATE)						
(Start with Present Employment)						
Sl. No.	Employer's Name & Address	Date of joining	Date of leaving	Position held	Nature of work	Last Salary drawn with break ups
Group-A: Corporate / Public Sector (Central / State)						
1.						
2.						
3.						
4.						
5.						
Group-B: Companies other than Corporate / Public Sector (Central / State)						
1.						
2.						
3.						
4.						

Note: Please indicate employment in Corporate / Public Sector under Group-A. Details of other categories of employment and practice etc. may be given under Group-B. Supporting documents to be enclosed for previous employment and experience.

9	Marital Status: a) Name of the Spouse b) Whether employed c) If yes, details of spouse	
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Name & Address of the Employer (Spouse)	Designation	Period of Service (Chronological Order)	Designation & Nature of work	Remarks

10. No. of Children (if married)

Sl.No.	Name of the Children	Age	Education Details

11. DEPENDANT PARTICULARS:

Sl.No.	Name	Date of Birth / Age	Relationship
1			
2			
3			
4			
5			

12. Family History (Blood Relations):				
Sl.No.	Name	Age	Employment Details, if any	
13. (i) Name of the Community: (Certificate to be enclosed)				
(ii) Whether belonging to SC/ST/MBC/BC/OC				
14. Languages known:				
Sl.No.	Name of the Languages	Speak	Read	Write
15. Reference: (at least two references not related to the applicant and residing in India may be given):				
Sl.No.	Name	Address	Position	Tel.No.
16. Details of physical disability of Permanent nature or chronic illness, if any				

17. GENERAL

I	(a) Any relative or acquaintance working in this Corporation If yes, give details (b) Details of relatives working in other Public Sector Undertakings / Government	YES / NO
II	(a) Membership with Professional Institutions (b) Other Institutions	
III	Sports Proficiency	
IV	Any political affiliation, If so, give a brief detail	
V	Have you applied before to this Corporation?	
VI	Minimum gross emoluments acceptable	Rs.
VII	Minimum joining time required	

DECLARATION

I, solemnly declare that the details given above are true to the best of my knowledge and I will produce the supporting documents for the same and in case, if details given are found not correct, I shall abide by the action of the management.

Place:

Date:

SIGNATURE OF THE APPLICANT