



Application Format for the post ofon contract basis vide - Advt. No. C-10/ 2024

- 1. Name in full (In Block letters) : _____
- 2. Father's Name : _____
- 3. Date of Birth (DD-MM-YY) : _____
- 4. Community (SC/ST/OBC/EWS/Gen): _____
- 5. Religion : _____
- 6. Marital Status -Married/Unmarried
(If Married, mention Spouse Name): _____

Affix self-attested
Passport size
Photograph

- 7. Whether any of your Relative is working/worked in Ircon- Yes/No
If Yes, please provide following details:

Name _____ Designation _____
Place of Posting _____ Relationship _____

Nature of Employment: Regular/Contractual/Service Contract/Deputation/Tenure (please tick).

- 8. Whether belong to Minority : Yes / No _____

- 9. Last/Present Organization : _____

(Please tick)

Govt. (Central/State)	PSU	Auto. Bodies	Others
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- 10.

Correspondence Address	Permanent Address
_____	_____
_____	_____
_____	_____
State _____ Pin _____	State _____ Pin _____

- 11. Contact Number with STD Code : _____

- 12. E-Mail Address : _____

- 13. Qualifications (Academic & Professional):

Exam Passed	Year of Passing	Name of the Inst./ University	Marks obtained	Max. marks	%age of marks

14. Work Experience as on 01-05-2024

Please give the detailed experience. Attach copy of **Experience Certificate(s)** or acceptable **proof of joining & relieving** in support of experience.

Post held with scale of pay or gross emoluments	Name of the Employer (Give the name of Organisation/ Company)	P E R I O D			Name of the Project(s) on which worked and nature of experience
		From Date DD/MM/YY	To Date DD/MM/YY	Total Duration (in Yrs. & Months)	

Total Experience = _____ Years _____ Months _____ Days

Signature of the Candidate
(Name of Candidate)

Declaration

I declare that the information furnished above by me is true to the best of my knowledge and belief and that nothing material has been concealed.

Place : _____

Date : _____

Signature of the Candidate

OBC CERTIFICATE FORMAT

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kumari.....son/daughter of
..... of Village/Townin District/ Division
.....in the State/ Union Territory..... belongs to the
..... community which is recognised as a Backward Class under the Government of
India, Ministry of Social Justice and Empowerment's Resolution No.
Dated.....*.

Shri/Smt./Kum.* and/or his/her family ordinarily reside(s) in
the.....District/Division of the State/Union
Territory. This is also to certify that he/she does not belong to the persons/sections (Creamy layer) mentioned in
column 3 (of the Schedule to the Government of India, Department of Personnel & Training OM No. 36012/22/93-
Estt(SCT), dated 8.9.1993 and modified vide Government of India, Department of Personnel and Training
O.M.No.36033/1/2013-Estt. (Res) dated 27.05.2013 and 13.09.2017**.

Date:

**DISTRICT MAGISTRATE /
DY. COMMISSIONER ETC.**

(Seal)

*** The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate as OBC.**

**** As amended from time to time.**

Note: The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.