

Advt. No.....

| Name of Pos   | ition | : Con  | sult | ant  | : Ge                                   | op  | hvsi                          | icis | st   |                              |   |       |  |     |      |    |   |  |   |   |  |
|---|-------|--|------|------|--|-----|-------------------------------|------|------|------------------------------|---|-------|--|-----|------|----|---|--|---|---|--|
| (USE CAPITAL LETTERS IN ENGLISH, LIMIT INFORMATION TO BOXES ONLY) |       |  |      |      |  |     |                               |      |      | )                            |   |       |  |     |      |    |   |  |   |   |  |
| Category (Please $$ )   | GEN S |  |      | C ST |  | OBC | OBC PH                        |      | ExSM |                              | ] |       | Affix your Passport size<br>photograph |     |      | ze |   |  |   |   |  |
| State of Domicil  | e     |  |      |      |  |     |                               |      |      |                              |   |       |  |     |      |    |   |  |   |   |  |
|   |       |  |      |      |  |     |                               |      |      |                              |   |       |  |     |      |    |   |  |   |   |  |
| Full Name<br>(Surname First)                                      |       |  |      |      |  |     |                               |      |      |                              |   |       |  |     |      |    |   |  |   |   |  |
| Father's Name   |       |  |      |      |  |     |                               |      |      |                              |   |       |  |     |      |    |   |  |   |   |  |
| Date of Birth   | Ľ     | Date   | Mo   | nth  |  |     | Year                          |      |      |                              |   | Sez   | x (Pl                                  | eas | e √) |    | Μ |  | F | 1 |  |
| Qualification <sup>*</sup>  | Deg   | Name of<br>egree With<br>Branch**Duration<br>of Course<br>(in years) |      | se   | % of<br>marks<br>obtained <sup>#</sup> |     | Month &<br>Year of<br>Passing |      |      | Name of Univers<br>Institute |   | rsity | 7                                      |     |      |    |   |  |   |   |  |
|   |       |  |      |      |  |     |                               |      |      |                              |   |       |  |     |      |    |   |  |   |   |  |
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|   |       |  |      |      |  |     |                               |      |      |                              |   |       |  |     |      |    |   |  |   |   |  |

\*Please mention qualifications from graduation onwards. \*\*Engineering Degree(s) at Graduation & Post Graduation level to be separately mentioned.

<sup>#</sup>Percentage marks not to be rounded off.

## **EXPERIENCE DETAILS:**

(Please mention full-time, on the job experience only. Training period must not be included in duration of experience. Please start with most recent experience)

| S No   | Name of Company/                     | Duration of        | Experience | Number of |        |  |  |  |
|--------|--------------------------------------|--------------------|------------|-----------|--------|--|--|--|
|        | Organisation where<br>worked/working | From date          | To date    | Years     | Months |  |  |  |
| 1.     |                                      |                    |            |           |        |  |  |  |
| (Provi | de documentary evidence, v           | vherever possible) |            |           |        |  |  |  |

| 2. Type of Assignments Handled/ Nature of wo                       |               |                 | -         |          | 1        |       |       |          |
|--|---------------|-----------------|-----------|----------|----------|-------|-------|----------|
| <b>Type of Assignments Handled/ Nature of wo</b>                   |               | 0 14            |           |          |          |       |       |          |
|  |               | rformed*        |           |          |          |       |       |          |
| (Provide documentary evidence, wherever poss                       | sible)        |                 |           |          |          |       |       |          |
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| 3.   |               |                 |           |          |          |       |       |          |
| Type of Assignments Handled/ Nature of wo                          |               | rformed*        |           |          |          |       |       |          |
| (Provide documentary evidence, wherever poss                       | sible)        |                 |           |          |          |       |       |          |
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| Type of Assignments Handled/ Nature of we                          |               | rformed*        |           |          |          |       |       |          |
| (Provide documentary evidence, wherever poss                       | sible)        |                 |           |          |          |       |       |          |
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|  |               |                 |           |          |          |       |       |          |
| <sup>*</sup> Increase the number of rows (maintain the form        | nat structure | e) for furnishi | ng more   | experie  | nce deta | ils.  |       |          |
|  | n senarate (  | sheet for cov   | ering the | entire   | exnerie  | nce n | rofil |          |
| Please affach additional defails if required in                    | n separate s  |                 | ti mg tin | , chun c | CAPUIN   | nee p |       | <b>د</b> |
| Please attach additional details, if required in                   |               |                 |           | 1        |          | -     | T     | e.       |
| Postal Address for   |               |                 |           |          |          |       |       | e.       |
| Postal Address for correspondence                                  |               |                 |           |          |          |       |       | e.       |
| Postal Address for<br>correspondence<br>(Don't write Your          |               |                 |           |          |          |       |       | e.       |
| Postal Address for correspondence                                  |               |                 |           |          |          |       |       | e.       |
| Postal Address for<br>correspondence<br>(Don't write Your          |               |                 | DIN       |          |          |       |       | 2.       |
| Postal Address for<br>correspondence<br>(Don't write Your          |               |                 | PIN       |          |          |       |       |          |
| Postal Address for<br>correspondence<br>(Don't write Your<br>Name) |               |                 | PIN       |          |          |       |       |          |
| Postal Address for<br>correspondence<br>(Don't write Your          |               |                 | PIN       |          |          |       |       |          |
| Postal Address for<br>correspondence<br>(Don't write Your<br>Name) |               |                 | PIN       |          |          |       |       | 2.       |
| Postal Address for<br>correspondence<br>(Don't write Your<br>Name) |               |                 | PIN       |          |          |       |       |          |
| Postal Address for<br>correspondence<br>(Don't write Your<br>Name) |               |                 |           |          |          |       |       |          |

Phone/ Mobile Number<sup>@</sup>

<sup>@</sup>Please mention phone number with appropriate country and area (STD) codes.

Nearest Airport / Railway Station from the Address mentioned above

I hereby declare that the particulars furnished above are complete and correct to the best of my knowledge and belief. I understand that if at any stage, it is found that the information given in the application is false or incorrect or I do not satisfy the eligibility criteria, my candidature / appointment is liable to be cancelled.

| Date                             | Place                                    | Signature                        |
|----------------------------------|--|----------------------------------|
| This form is required to be duly | filled-in, signed and then scanned in PD | F format. Please mail this along |

with other testimonials to <u>recruitenp@indianoil.in</u> latest by [ ] August 2013.