## APPLICATION FORM (USE CAPITAL LETTERS, LIMIT INFORMATION TO BOXES ONLY)

1. POST A/F				2. CATE	GORY (Please	tick)	SC	ST	OBC	GEN				
3. NAME		4. Parent's Name											Affix Small	
5. Mailing Address			Pin code			6. State of Dor 7. E-Mail id			zile				size photograph 3 x 3.5 cms	
8.Date of Birth	Date	Month	Year					_	Year	Month	n Da	ıys	10. Contact. No (Te	el/Mobile)
					<b>9.</b> A	.ge								
11. Qualification (Academic, Tech Professional and related, if any (Cl onwards)	nical, computer	Duration of Course (In years)		Month and Year passing	of Name o	f Univer	sity/Inst	titute	Sub	jects				
12. APPRENTICESHIP TRAINING: - Whether undergone Apprenticeship Training in Mathura Refinery. YES NO IF YES YEAR:  13. Whether belongs to Ex-servicemen category YES NO 14. Post Qualification Experience: (Other than Apprenticeship Period/training)														
Name of Company		Duration of Experience		Number of		Type of assignments handled/s				led/spe	cific natu	ire of w	ork/duty performed (	attach
Organisation where working/worked		From date	To date	Years	Months		additional sheets if required)							
NOTE: - Please	attach your	self attested cop	oies of Certificate	es/ testimonials	with the appl	ication.								
15. Application	Fee particu													
DD No.		Name of Issuing Branch and code								Date of	issue			
	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 meet the prescribed eligibility criteria, my candidature/appointment is liable to be cancelled.													
Date :								Signature :						