

Check List for enclosures: For Office use only (Certificates duly attested)

1	SSC/Matric/Date of Birth Certificate	
2	NOC Certificate	
3	SC/ST/OBC/ EWS Certificate	
4	PwBD Certificate	
5	Two latest passport size photographs in Blue Background	

**APPLICATION FORM – RECRUITMENT OF
CIVILIAN MOTOR DRIVER (ORDINARY GRADE)
NAVAL SHIP REPAIR YARD – PORT BLAIR**

(TO BE FILLED BY CANDIDATES IN CAPITAL LETTERS ONLY)

Affix latest Self-attested passport size colour photograph with Blue Background

1. Post applied for
2. Name of the Candidate : _____
3. Father's name : _____
4. Date of Birth :

Days	Month	Year
5. Age as on the closing date of application : Years_____Months_____Days_____
6. Nationality : _____
7. Gender (Please tick the appropriate box) :

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
Transgender	<input type="checkbox"/>
8. Religion : _____
9. Permanent Address : _____

10. Address of Correspondence : _____

11. Email Id. : _____

12. Contact Tel No. / Mobile No. : _____

13. Aadhar Card No. :

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14. Are you a Government Employee :

Yes	
No	

15. Whether Ex-Serviceman (ESM) :

Yes	
No	

Length of Service in the Armed Forces (in years):

Have you already joined a civil post by availing benefit of reservation for Ex-Serviceman, If yes, provide details thereof

16. Category :

UR	OBC	SC	ST	EWS	ESM

17. Whether seeking Age Relaxation :

Yes	
No	

18. Do you want to make your personal information available for accessing job opportunities in terms of DoP&Ts OM No.39020/1/2016-Estt.(P) dated 21 Jun 2016. :

Yes	
No	

19. (a) Education Qualification :

<u>Qualification</u>	<u>University/Board</u>	<u>Year of Passing</u>	<u>Total Marks secured</u>	<u>Percentage of Marks</u>
10 th Class/ equivalent				

20	(a) Technical Qualification (attach copy of Driving license):				
	<u>Qualification</u>	<u>Date of issue</u>	<u>License No</u>	<u>Issuing Authority</u>	<u>Valid upto</u>
	Heavy Motor Vehicle Driving License				
	(a) Experience (attach certificate) :				
	<u>Post held & Pay Scale</u>	<u>Office / institute</u>	<u>Period of Service</u> <u>From</u> <u>To</u>		<u>Total period in years & months</u>
21	Identification mark (please write in the box)				

DECLARATION

I hereby declare that:

(a) The information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage my candidature/appointment shall be liable for cancellation/termination, without notice or any compensation in lieu thereof.

(b) I have ensured that, I fulfill eligibility criteria for the post applied for.

Date: _____(Left hand Thumb impression) (Signature of the Candidate)

Place: _____