



NEYVELI LIGNITE CORPORATION LIMITED

(A "Navratna" Govt. of India Enterprise)
P.O. NEYVELI-607 801, Cuddalore District, Tamil Nadu
(Regd. Office: 135 Periyar EVR High Road, Kilpauk, Chennai-600 010)

Affix color
passport size
photograph

APPLICATION FORM

Advertisement Number : 07/2013

Name of the Post : INDUSTRIAL TRAINEE (FINANCE)

(Use Block Letters)

1. Name in full

2. Father's Name

3. Mailing Address of the applicant

Description	(a) Permanent	(b) Present
in case C/o		
House No./Room No./Plot No.		
Street Name		
Area / Locality / Nagar		
Village / Town / City		
Taluk		
District		
State		
Pincode		
Contact Number(s)		
Nearest Railway Station		

(c) email : @

4. Date of Birth
(Enclose documentary evidence in support of it)

D	D	M	M	Y	Y

Age as on 01/08/2013

: ____ Years ____ Months ____ Days

5. (a) Community

: SC ST OBC UR

(b) Sub-Caste (Attach documentary evidence
in case of SC / ST / OBC)

:

(c) Religion

:

(d) Nationality

:

By Birth / Domicile

6. Recognised Educational / Other Professional Qualification(s)

Name of the Exam	Month & Year of Passing

7. Details of Training

Institution in which training was obtained with duration and year of Training	Nature of Training	Remarks

8. Membership of Professional Institutions, if any,

- | | |
|----|----|
| 1. | 3. |
| 2. | 4. |

9. Languages Known

Language Name	Speak	Read	Write
(a) Mother Tongue			
(b) Other Languages:			
i)			
ii)			
iii)			

10. Marital Status (Please put ✓ mark) : Married / Single / Widower / Widow

11. Are you related to any employee of NLC ? : Yes / No

(Father, Mother, Sister, Brother or any relative)
If Yes, details of the related employee

Name	
Relationship	
CPF No.	
Status	Serving Retired Expired

12. Have you been a candidate for any other post in NLC before? If so, furnish details.

13. Any other information including extra curricular activities (NSS, NCC, Sports, Cultural and Literary) etc.

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14. References: Please furnish below names of two persons not related to you, to whom reference could be made regarding your character and antecedents.

i) Name _____	ii) Name _____
Position _____	Position _____
Address _____	Address _____
Tel. No. _____	Tel. No. _____
Telex / Fax _____	Telex/Fax. _____

I hereby declare that all the above information furnished by me are true and complete. I am aware that furnishing of false / incomplete information will result in loss of employment at any stage.

I also undertake to notify any changes in the information furnished within 7 days of such change.

Place:

Date:

Signature of the applicant

Note:

- If the space provided in any column is insufficient, separate sheets may be attached.
- Mention exact dates wherever required
- Attested photostat copies of certificates in support of the information provided should be enclosed along with this application form.