

RASHTRIYA ISPAT NIGAM LIMITED
VISAKHAPATNAM STEEL PLANT

Recruitment Advt. No.07/2014
(Please fill in English only)

Affix your latest
 passport size
 photograph
 (Colour) and sign
 on it (do not pin or
 staple)

Application for the Post of _____

I. Personal Details								
1.	Name (IN BLOCK LETTERS)							
2.	Father's Name							
3.	Contact Address							
	PIN <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>							
4.	Telephone No. with STD code							
	Mobile No. (mandatory)							
	E-Mail ID (mandatory)							
5.	Date of Birth (Please enclose proof) DD _____ MM _____ YYYY _____							
6.	Gender (Male/Female)							
7.	Religion							
8.	Category [Gen/OBC(non creamy layer)/SC/ST]							

II Educational Qualification (Graduation onwards) * (Please enclose certificate copies)							
Course name	Board / University/ Institute	Special ization	Main subjects undertaken	Duration (MM/YY)		%age of Marks	Grade/ Class
				From	To		
Graduation							
Other Qualifications (ACA/ AICWA)							
Have Associate Membership of the Institute of Company Secretaries of India						<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have Fellowship of Institute of Company Secretaries of India						<input type="checkbox"/> YES	<input type="checkbox"/> NO

Note: If **YES** please enclose the certificate

III	Employment details* (beginning with the latest) (Please enclose experience certificate copies)		
	Total post-qualification experience: _____ years _____ months		
Organization, Designation with Scale of Pay/ Emoluments	Period (mm / yy)		Responsibilities
	From	To	

On selection, how soon can you join?	
Any other information	

NOTE: * Please attach separate sheet(s) if space given is insufficient.
Please attach copy of State Medical Council Registration No. and Date

IV. Details of Challan (for General / OBC candidates)

Deposit Journal No.: _____ Date of deposit: _____

SBI Branch Code _____ Amount: ₹ 300/-

(Please enclose VSP copy of challan)

DECLARATION:

I hereby declare that I agree with all the terms & conditions given in the aforesaid advertisement and that all the information stated in this application form are true. In case any of my declaration and documents attached herewith is found to be untrue and if I am unable to produce relevant documents in support of the eligibility condition, my candidature may be cancelled at any stage of the recruitment process. In the event that the wrong statement is detected after my appointment then my services are liable to be terminated without notice.

Place: _____

Signature of the candidate

Date: ____/____/2014

Application complete in all respects with self attested copies of certificates / testimonials should be sent by speed post / courier to “**Asst. General Manager(Personnel)/c-Recruitment, Room No.233, Main Administrative Building, Visakhapatnam Steel Plant, Visakhapatnam-530 031**” so as to reach latest by **27th August 2014**.