## 007AHARIDWAR NATURAL GAS PRIVATE LIMITED House No. 129, New Haridwar Colony, Behind Matrichaya Medical Centre, Ranipur Mode, Haridwar-249401 (U.K.)

## **APPLICATION FOR THE POST OF SENIOR OFFICER POSITION**

Paste passport size photograph (Not older than 3 Months)

1.	Name of the Position Applied	:		
2.	Name (in Full & Block Letter)	:		
3.	Gender	:		
4.	Father's Name	:		
5.	Date of Birth & Age (As on Last Date of Receipt of Application)	:	DOB	Age
6.	Current Address	:		
7.	Permanent Address	:		
8.	E-mail	:		
9.	Mobile No.	:		
10.	Nationality	:		
11.	Marital Status	:		
12	Category	:		

13a.		nal & Essential Qualification from Matriculation / HSC to Essential Qualification)								
	Note: Supp	oorting documer	its are re	quired to be	submitted	along	with Ap	olication fo	orm.	•
Exam Passed		Name of Board/University/Institute		Month & Year of Passing			jects ken	9	% of Marks	
10 <sup>th</sup> Class/ HSC										
	Class / rmediate									
13b.				Essentia	l Qualificat	ion				
Exam Passed		Name of Board/University/Institute		Month & Year of Passing		Stream/ Specialization		9	% of Marks	
Gradı	uation									
Post- Gradu	uation									
13c.			Addi	itional / De	sirable Qua	alifica	tion			
Exam Passed		Name of Board/University/Institute		Year of			ream/ alization		% of Marks	
T <sub>1</sub>										
13.		lification Expe								
	Note	: Supporting doc		ration	to be subm	itted a	along wi	th Applicat	tion	torm.
Name & Address of the Employer		Post held/ Designation		MM/YY)  To Date	Nature of Duties/ work details	G Sa	y Scale/ Gross NOC/ Salary Relievir drawn Certifica		ıg	Reasons for leaving

Total Experience (Executive Position):	Years,	Months,	Days.
Total Experience (CGD/ Oil & Gas Sector): _	Years,	Months,	Days.
Applications either incomplete or not h rejected.	aving required	documents attac	ched are liable to be
List of Attached documents (Self attested Graduation, and Post-Graduation & Experie	-	rence to DOB, Ed	lucation 10 <sup>th</sup> onwards,
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
<u>Declaration:</u> I hereby declare that the enti complete and correct to the best of my kno to be false or incorrect at any stage, my ca without any notice.	wledge and beli	ef. in the event, th	ne information is found
Place:			
Date:	(NA	ME & SIGNATURE	OF THE APPLICANT)