

Application for the post of Mining Sirdar & Dy.Surveyor T&S Gr.C

Application to be Addressed to: (By Ordinary Post Only) <u>Do not send through Registered/Speed Post /Courier.</u>	PO Box 1102, Jayanagar 3rd Block, Bangalore – 560011.	PASTE YOUR PASSPORT SIZE RECENT COLOUR PHOTOGRAPH Please sign here
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(Fill up the following details in BLOCK letters)

Advertisement Ref No.	
Post Applied For	
Name	
Father / Husband's Name	
Mother's Name	
Caste (SC/ST) (Please tick whichever is applicable & attach self-attested photo copy of certificate)	SC /ST
Religion	Hindu/ Muslim/ Sikh/ Christian/ Buddhist/ Zoroastrian/ Others

Date of Birth	D	D	M	M	Y	Y	Y	Y	Age on cut-off date	Year	Month	Day
Sex (Tick which ever is applicable)	Male <input type="checkbox"/>	Female <input type="checkbox"/>										

(Tick whichever is applicable. If yes put , else) (Attach self-attested photocopies of all supporting documents)

Diploma in Mining Engineering	<input type="checkbox"/>	YES/NO									
Mining Sirdarship Certificate issued by DGMS	<input type="checkbox"/>	VALID TILL									
Survey Certificate of Competency issued by DGMS	<input type="checkbox"/>	VALID TILL	D	D	M	M	Y	Y	Y	Y	
Overman Competency Certificate issued by DGMS	<input type="checkbox"/>	VALID TILL	D	D	M	M	Y	Y	Y	Y	
First Aid Certificate	<input type="checkbox"/>	VALID TILL	D	D	M	M	Y	Y	Y	Y	
Gas Testing Certificate	<input type="checkbox"/>	VALID TILL	D	D	M	M	Y	Y	Y	Y	

PRESENT ADDRESS for Communication											
C/o											
Line 1:											
Line 2:											
Post:											
District:											
State:						PIN					
Telephone						Mobile					
E-mail:-											

PERMANENT ADDRESS									
C/o									
Line 1:									
Line 2:									
Post:									
District:									
State:		PIN							
Telephone		Mobile							
E-mail:-									

Employment Exchange Registration Details.									
Registration Number		Name of the Exchange		Yr of Registration					

Qualification Details (Attach self-attested photocopies of all supporting documents)								
Sl No	Examination Passed	Stream	Year of Passing	Duration of Course	Name of the Institute	Board/ University	Division / Grade	%age

Experience Details					
Sl No	Organization Name	Post Held	From Date	To Date	Description

Declaration	
<p>I do here by declare that the above information as furnished by me is true to the best of my knowledge & belief. I further give an undertaking that at any point of time, if any of the above Information is found false/ incorrect my candidature is liable to be cancelled/rejected followed by prosecution under the law.</p>	
Date:	Signature of Candidate

Instructions to the Candidate:

1. Send the application along with self-attested photocopies of all supporting documents.