

# NATIONAL FERTILIZERS LIMITED CORPORATE OFFICE, NOIDA

### **BIO DATA FORM**

ADVT. NO.	ADVT. DATE	
POST APPLIED FOR		
Are you employed in Govt. / Semi Govt. / Public Sector Undertaking / Govt. Department?  IF YES	YES/ NO	Affix one
Has your application come through proper channel?	YES/ NO	passport size photograph
OR Have you produced No Objection Certificate?	YES/ NO	here

### ALL ENTRIES TO BE MADE IN CAPITAL BLOCK LETTERS

		FIRST NAME	MIDDLE NAME	SURNAME
1.	Name in full (in block letters) with aliases, if any, (Please indicate if you have added or dropped at any stage any part of your name or surname)			
2.	a) Date of Birth (DD/MM/YYYY)			
	b) Age as on Cut Off date			
3.	Father's Name			
4.	Mother's Name			
5.	Marital status (Bachelor / Spinster / Married / Widow / Widower / Divorcee).			
6.	Spouse's name (Wherever applicable)			
7.	Nationality and religion.			
8.	State to which you belong:			
9.	Mobile Number			
10.	Email ID			
11.	(a) Identification marks			
	(b) Height & weight	Height :	Weight	_:

12.	Category	UR	(	) EWS	(	)
		SC	(	) ST	(	)
		OBC (NCL)	(	)		
	Name of the caste (if belong to SC/ST/OBC(NCL)/EWS)					_
13.	Are you a Person with Benchmark Disability (PwBD) i.e. with 40% or more disability?	YES (	)	NO	(	)
	If Yes,					
	a) PwBD category					_
	b) Percentage of Disability					_
14.	Are you:	YES	NO	If Yes, th	en Total S toff Date	Service
	a) an Ex-serviceman	( )	( )			
	b) Serving Officer in armed forces	( )	( )			
	c) A dependent of a Jawan killed/ severely disabled in action	( )	( )	N	<u>A</u>	
15.	Are you a Departmental Candidate (NFL Employee)?	YES (	)	NO	( )	
	If Yes,					
	Employee No :					_
	Designation :					_
	Place of Posting (Unit/Office):					_
		1				

16.	Particulars	Present/ Corresponde	nce Address		Permanent A	Address		
	Address Line 1:							
	Address Line 2:							
	City:							
	State:							
	District:							
	Pin code:							
17.	Languages Known:		Read		Write	Speak		
40								
18.	Educational qualific training, if any, plea educational qualific training in <b>Annexur</b>	As per Annexure-I						
19.		istinction in sports /	·					
20.	Technical/ Profes Thesis.	sional Publications/	′					
21.		Please give details of the proforma attached						
22.	Are you prese Govt./Public Sector Sector/ Private Sect	or Undertaking/Joint						
23.	contributions made	awards/ outstanding / appreciation letters/ luring service may be						
24.	If selected, how soo Days).	n can you join? (in						
25.	Permanent Account	Number (PAN):						
26.	AADHAAR No.:							
27.	Universal Account N	lumber (UAN):						

28.	Do you have any dependent? If so, state number of dependents, their relationship with you.	
29.	Are you related to any of the present Director of the Company? If yes, state the name and relationship.	
30.	Are you related to any of our present employees? If yes, please furnish the details	
31.	If ever engaged in Defence Services, give details of rank, emoluments, functions performed etc.	
32.	Are you a Govt. Pensioner? If yes, state the amount of your monthly pension and last pay drawn.	
33.	Are you in debt? If yes, state the sources from which you can repay.	
34.	State the hereditary/chronic diseases / physical handicap, if any.	
35.	Have you worked in the company before, if 'yes' when and how long?	
36.	Have you ever applied before to this company? If 'yes' when and for which post?	
37.	Have you been interviewed before by this company? If 'yes' when and for which post? Result of interview may be indicated. In case offer of appointment received that may also be specifically indicated.	
38.	I certify that -	
	<ul> <li>No FIR has been filed against me in any Police Station OR</li> <li>I have not been arrested, prosecuted, bound down, detained, convicted, or fined by the Court of Law for any offence OR</li> </ul>	Yes ( ) NO ( )  If No, please furnish details below and attach relevant documents eg. Copy of FIR, Court Order etc.:
	No proceedings are pending against main any Court of Law OP.	
	<ul><li>me in any Court of Law OR</li><li>I have not been rusticated by any</li></ul>	
	University/ Debarred / disqualified by any Public Service Commission or any	
	other agency / authority from	
	appearing in its examination.	

39.	I also	certify that during my em	ployment -							
	to me OR				( please nt docum		NO details	•	) and	attach
		vigilance case is pendin te of submission of applic								
	ua	te of submission of applic	auon.							
40.	O. How do you consider yourself suitable for the position (Attach separate sheet of not more than one page, if necessary).									
41.		other details you wish h separate sheet, if nece								
42.	List th	ree personal references:								
	SI. No.	Name	Address &	Contac	et No.		Occupati	on	Year: Know	
NA CALL					. IV.					
With	refere	nce to concerned adver	tisement and	d my oi	nline app	olication	. I herek	by decl	are ti	ŀ

With reference to concerned advertisement and my online application, I hereby declare that the above particulars furnished by me are true to the best of my knowledge and belief. If appointed, I agree to be governed by the rules and regulations of the National Fertilizers Limited (NFL) framed/modified from time to time. I know that if any information given here is found to be wrong or incomplete or any facts, etc. are found to have been suppressed or concealed by me, my service is liable to be summarily terminated at any point of time.

(Signature	or the a	ppiicani)
	(Signature	(Signature of the a

## STATEMENT INDICATING THE DETAILS OF EDUCATIONAL QUALIFICATION AND PROFESSIONAL TRAINING OF THE APPLICANT

#### **A-EDUCATIONAL QUALIFICATION**

Period From To	Name & address of the School/College attended	Examination Passed	University/ Board	Subjects taken	Division	%age of marks	Remarks

#### **B-PROFESSIONAL TRAINING**

Period		Name & Address of the	Course	Examination	Sponsored	Division	% age of	Remarks	
From	То	Institution	contents	Passed	by		marks		

(Signature of the Candidate)

## STATEMENT INDICATING THE DETAILS OF EXPERIENCE IN RESPECT OF THE APPLICANT

Name & Address	Post Held	Period			Salary De	tails	Duties performed/	Reasons for	
of the employer		From (DD/MM/YYYY)	To (DD/MM/YYYY)	Total	Pay Scale	Annual CTC (in Lakh)	Performing (In Brief)	leaving (specifically indicating the circumstances under which you have resigned from the previous post or whether your services were terminated).	

I hereby certify that the contents/ information supplied above are true.