

**EMPLOYMENT APPLICATION FORM FOR TRAINEES**

Affix recent Passport sized colour photograph duly attested by T&PO of your college with official seal

POSITION APPLIED Please tick(✓)	POST GRADUATE ENGINEER (PGET)				DISCIPLINE	CIVIL			
	GRADUATE ENGINEER (GET)					MECHANICAL			
	DIPLOMA ENGINEER (DET)					ELECTRICAL			
	OTHERS (Please Specify)					OTHERS			

PERSONAL DETAILS	NAME IN BLOCK LETTERS (As per SSC Records):														
	PRESENT ADDRESS - VALID UNTIL :							PERMANENT ADDRESS:							
	City :							Pin Code :							
	E mail id :							Mobile No.							
	SEX	MALE		DATE OF BIRTH				MARITAL STATUS				NATIONALITY			
		FEMALE													
	PASSPORT NUMBER			NAME AS IN PASSPORT						PROFESSION AS IN PASSPORT					
	DATE OF ISSUE		VALID UPTO				PLACE OF ISSUE				COUNTRIES VALID FOR				
	LANGUAGES KNOWN (R-READ; W-WRITE; S-SPEAK)	MOTHER TOUNGE	R	W	S	LANGUAGE	R	W	S	LANGUAGE	R	W	S		
MOST RECENT ILLNESS				NO. OF DAYS ILL		NATURE OF ILLNESS									
POWER OF EYE GLASS	LEFT EYE					PHYSICAL DISABILITY (IF ANY)				HEIGHT (Cm)					
	RIGHT EYE									WEIGHT (Kg)					

EDUCATIONAL DETAILS	NAME OF THE INSTITUTE									
	NAME OF THE DEGREE/DIPLOMA WITH SPECIALIZATION						NAME OF POST - GRADUATION WITH SPECIALIZATION			
	EXAM PASSED	MARKS				YEAR OF PASS	SCHOLASTIC ACHIEVEMENTS (DISTINCTION/ AWARDS/ SCHOLARSHIPS)			
		SCORED		MAXIMUM						
	SSC OR EQUIVALENT									
	INTERMEDIATE OR EQUIVALENT	1st Yr								
		2nd Yr								
	DEGREE OR DIPLOMA	1st Yr								
		2nd Yr								
		3rd Yr								
		4th Yr								
	AVERAGE OF DIPLOMA / DEGREE MARKS (IN PERCENTAGE)									
P.G. DEGREE/ P.G DIPLOMA	1st Yr									
	2nd Yr									
AVERAGE OF THE P.G. MARKS (IN PERCENTAGE)										

TITLE OF THE PROJECT WORK SUBMITTED FOR DEGREE/ DIPLOMA				
TITLE OF THE PROJECT WORK SUBMITTED FOR POST GRADUATION/ POST DIPLOMA				
WHAT ARE YOUR FUTURE PLANS REGARDING HIGHER STUDIES ?				
FAMILY DETAILS	NAME OF YOUR FAMILY MEMBERS	DATE OF BIRTH	RELATIONSHIP	OCCUPATION
GENERAL DETAILS	IS THERE ANYTHING YOU WISH TO MENTION, WHICH WILL HELP US IN CONSIDERING YOUR APPLICATION?			
	RELATIVES/ ACQUAINTANCES IN L&T GROUP OF COMPANIES			
	NAME & P.S NO	RELATIONSHIP	POSITION	COMPANY
FACULTY REFERENCE	FACULTY REFERENCE			
	1)		2)	
	Phone No: E mail id :		Phone No: E mail id:	
DECLARATION	DECLARATION UNDER SECTION 314 OF COMPANIES ACT AS AMENDED IN 1974 (STIKE OUT WHICHEVER IS NOT APPLICABLE)			
	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 1. I hereby declare that I am not connected with any director of the company as his partner or his relative as detailed under section 6 of the Companies Act 1956. </div> <div style="width: 48%;"> 2. I hereby declare that I am a partner/ relative of Mr. _____ <div style="text-align: center;">a director of the company as</div> </div> </div> <p>I hereby affirm that my answers to the foregoing questions are true and correct and I understand and agree that misrepresentation or omission of facts called for in this application or other company records shall automatically resigned the contract of employment. I authorise inquiry with regard to my character, ability and habits to any and all persons and agree to hold such persons harmless with respect to any information that may give.</p>			
DATE:	PLACE:	SIGNATURE OF APPLICANT:		

PLEASE DO NOT ATTACH ANY ORIGINALS/ COPIES OF CERTIFICATES OR TESTIMONIALS