

**INDIAN PORTS ASSOCIATION
New Delhi**

<p>Please Affix recent photograph and sign across</p>
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1	POST APPLIED FOR	Executive Assistant		
2	APPLICANT NAME (Sh./ Smt./Ms.)			
3	FATHER /HUSBAND NAME			
4	DATE OF Birth (dd/mm/yyyy)			
5	AGE (as on Last date of submitting applications)	(YEARS)	(MONTHS)	(DAYS)
6	(i) CORRESPONDENCE ADDRESS			
			STATE:	PINCODE:
	(ii) PERMANENT ADDRESS			
		STATE:	PINCODE:	
7	CONTACT NUMBER WITH STD CODE			
8	MOBILE NUMBER			
9	EMAIL ID			

10. Details of Educational Qualifications:

Sr. No	Qualification(Degree/Diploma) With Specialization	Name of the Institution/Board/University	Year of passing	Division/Grade /Percentage of Marks

11. DETAILS OF EXPERIENCE IN CHRONOLOGICAL ORDER:

(IF REQUIRED, SEPARATE SHEET CAN BE ATTACHED IN THE SAME FORMAT)

Sr. No	Name & Address of the Organization	Designation / Post Held	From	To	Part Time /Contract Basis/ Ad-hoc/ regular/ Temp/ Permanent	Nature of Duties

12. Total no. of years of relevant experience :

13. Whether any legal proceeding or action of inquiry is going on against the Applicant : Yes/No

If Yes – Details thereof

I hereby declare that the particulars furnished above are true. I understand that my candidature will be cancelled if any information is found to be incorrect or false at any stage or me not satisfying the eligibility criteria according to the requirement prescribed in the vacancy notification circular.

Date:

Place:

Signature of Candidate

Name: _____

**INDIAN PORTS ASSOCIATION
New Delhi**

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1	POST APPLIED FOR	Junior Assistant.		
2	APPLICANT NAME (Sh./ Smt./Ms.)			
3	FATHER /HUSBAND NAME			
4	DATE OF Birth (dd/mm/yyyy)			
5	AGE (as on Last date of submitting applications)	(YEARS)	(MONTHS)	(DAYS)
6	(i) CORRESPONDENCE ADDRESS			
		STATE:		PINCODE:
	(ii) PERMANENT ADDRESS			
		STATE:		PINCODE:
7	CONTACT NUMBER WITH STD CODE			
8	MOBILE NUMBER			
9	EMAIL ID			

10. Details of Educational Qualifications:

Sr. No	Qualification(Degree/Diploma) With Specialization	Name of the Institution/Board/University	Year of passing	Division/Grade /Percentage of Marks

11. DETAILS OF EXPERIENCE IN CHRONOLOGICAL ORDER:

(IF REQUIRED, SEPARATE SHEET CAN BE ATTACHED IN THE SAME FORMAT)

Sr. No	Name & Address of the Organization	Designation / Post Held	From	To	Part Time /Contract Basis/ Ad-hoc/ regular/ Temp/ Permanent	Nature of Duties

12. Total no. of years of relevant experience :

13. Additional Skill for Post No. 2 (Jr. Assistant)

Shorthand Speed	Typing speed	MS Office Proficiency (Yes/No)

14. Whether any legal proceeding or action of inquiry is going on against the Applicant : Yes/No
If Yes – Details thereof

I hereby declare that the particulars furnished above are true. I understand that my candidature will be cancelled if any information is found to be incorrect or false at any stage or me not satisfying the eligibility criteria according to the requirement prescribed in the vacancy notification circular.

Date:

Place:

Signature of Candidate

Name: _____