



APPLICATION FORM

Affix Photograph of the Candidate

Full Name:	
Post Applied for: _____	

Gender: M / F **Age:** ___ Years **Date of Birth:** __/__/__ **Place of Birth:** _____
Citizenship: _____ **Religion:** _____ **Married:** Yes / No **Blood Group:** _____
Aadhar No.: _____

Communication Details:

Present Address:	Permanent Address:

Email: _____

Mobile No. : _____ Residence Telephone No.: _____

Is/are there any of your relative working in the GNFC ? If yes, please give details. Yes/No.

Name	EC No.	Designation	Deptt.	Relationship
1.				
2.				
3.				

A. Educational Qualification: (Starting from latest qualification)

Educational Std./ Degree/Post Graduation	Year of Passing	Name of the Institute / college	Subjects / Discipline/Specialization/s	Grade/ %age/Class	University

Other qualification (If any) : _____

B. Family details:

Relation	Name	Profession	Office Name & Address	
Spouse				
Father				
Mother				
Children				
1				
2				

Languages Known: (Classify: Very Well, Good, Fair, Little)

Language	Write	Read	Speak

Mother Tongue: _____

Work Experience: (Current Company First)

Name and address of organization /s	Name and Designation of immediate superior	Period		Position		Total Experience		Nature of Work (Job Profile)	Reason for Leaving
		From	To	Initial	Final	Year	Months		

Please elaborate your present job responsibility point wise:

Reference : (Person mentioned should hold responsible position and should not be a relative)

Name	Address & Contact No.	Occupation	Years of acquaintance
1.			
2.			

DECLARATION OF CURRENT / LAST SALARY DRAWN

Name of the candidate		
Name of the organization		
Post held		
Scale of pay		
Date of next increment		
	Rs. Per Month	Rs. Per Annum
Basic pay		
Personal pay		
Dearness Allowance		
Additional D A		
House Rent Allowance		
City Compensatory Allowance		
Conveyance Allowance / Assist.		
Professional / Book Allowance		
Gardening Allowance		
Canteen Allowance / Assist.		
Education Allowance / Assist.		
Medical Allowance / Assist.		
Washing Allowance		
Hazardous / Chem. Allowance		
Shift Allowance		
Other Allowance, If any,		
LTC / LTA		
Bonus / Gift		
Welfare Items		
Medical Reimbursement		
Uniform & Shoes		
PF		
Gratuity		
Pension		
Furniture facility / Allowance		
Other perks, If any		
Grand Total (CTC)		

Have you ever applied GNFC earlier? Yes / No.

If yes, Position: _____, Interview Date: _____.

I hereby declare that the information furnished above by me is true and I will furnish proof on any of the above when asked to.

_____ Date

_____ Signature of the candidate

Note: Photocopies of documents regarding Age, Qualification, Experience, Last Salary Slip, Aadhar card are to be enclosed without FAIL.

Enclosure:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

For office use only

Status :

Shortlist

Not suitable

Function : _____

Designation may be given: _____

Short listing Approved by : _____