



BRAHMAPUTRA CRACKER AND POLYMER LIMITED

[A Government of India Enterprise]

APPLICATION FOR EMPLOYMENT

Sl. No. _____

Please affix your
passport size
photograph

Advertisement No:

Name of the post:

Pay Scale: ₹

PERSONAL DATA

1. (i) Category: SC ST OBC EWS Ex SR PWD

(Tick in appropriate box if applicable)

(ii) If PWD then tick the appropriate box : VH HH OH

(iii) Name:

(in Capital Letters – Underline Surname)

(iv) Father's / Husband's Name: _____
 Occupation: _____

2. (i) Present Postal Address : _____

 (ii) Telephone No. : Office _____ /Resi. _____
 (iii) Mobile No: _____ / Email Id.(If Any): _____
 (iv) Permanent Address : _____

 (v) Hometown : _____

3. (i) Date of Birth : _____
 (ii) Exact Age : _____ Year _____ Months _____ Days
 (iii) State to which you belong : _____
 (iv) Nationality : _____
 (v) Religion : _____
 (vi) Employment Exchange Registration No. (If Any) : _____
 (vii) Name of the Employment Exchange : _____

4. (i) Height: _____ inches/ cms Weight : _____ Kgs
 (ii) Power of Glasses if used: Right Eye _____ Left Eye _____

[Note: In respect of technical officers, total myopia (including the cylinder) shall not exceed – 4.00D. The total amount of hyper metropia (including the cylinder) shall not exceed +4.00D in each eye. In case of Non-Technical officers, the total Myopia shall not exceed -8.00D and total Hypermetropia shall not exceed +6.00D in the case of candidates above the age of 20 years and -6.0D and + 6.00D respectively in the case of those upto the age of 20 years.]

(iii) Do you suffer from any major ailment (e.g., Heart Disease, T.B., Cancer etc.)? YES/NO
 If Yes, give Details:

5. In case of SC/ST/OBC category, provide name of Community/ Tribe: _____
 Also attach attested copy of Certificate from prescribed authority

6. Incase Physically handicapped, give details of physical defects: _____
 Also attach attested copy of Certificate from competent medical authority.

7. Do you belong to Economically Weaker Section [EWS]: YES/NO
 If Yes attach attested copy of certificate from prescribed authority

8. In Case Ex-Serviceman provide:

(i) Rank _____ (ii) Corps/ Regiment No. _____

(iii) Date of Commission _____ (iv) Date of Discharge _____

(v) Date of starting of pre-commission training, if any _____

(vi) Education of Military _____

9. (a) Sex: Male/Female/Transgender (b) Marital Status: Single/Married/Widowed/Divorcee

(c) Details of Children:

S.N	Name	Age	Sex	Educational Qualification, if any
1.				
2.				
3.				

(d) Details of other Dependants if any:

S.N	Name	Age	Sex	Relationship	Remarks
1.					
2.					
3.					
4.					
5.					

(e) Is Your spouse employed? Yes / No

If so, give details of the organisation and place of posting etc.

ACADEMIC & PROFESSIONAL QUALIFICATION

10. Details of Academic & Professional Qualifications (Matriculation onwards). Also mention details of statutory qualifications, if any, required for the post.

Examination Degree passed	College/ Institution	Year of Joining (dd/mm/yyyy)	Year of Leaving/ passing (dd/mm/yyyy)	Board/ Univer- sity	Class/ Division obtained	% of marks obtained	Main subject studied	Remarks

11. Details of Membership of Professional Bodies/ Institutes/ Associations, if any

Status of Membership	Institution/ Association	Year of Enrolment	Whether recognized by Govt. of India as equivalent to Degree etc.	Whether awarded after passing prescribed Exam.

12. Proficiency in Languages:						
	Languages	Can read (YES/NO)	Can write (YES/NO)	Can speak (YES/NO)		
Mother Tongue						
Other languages						
1.						
2.						
3.						
4.						
Training & Attainments						
13. Details of Training / Apprenticeship etc.:						
Sl.No.	Name of Institute or Employer	Nature of Training or Apprenticeship/ Main Contents of the course	From	To	Examination passed if any	Pay/ Stipend if any

14. Details of experience starting from present with scales. Please give details of different positions held in each organisation with dates:

Employer's Name & complete address (start from present employer)	Period of Employment		Duration		Designation and scale of pay	Basic Pay	Total Emoluments	Exact nature of duties/ functions	Reason for leaving
	From (dd/mm/yyyy)	To (dd/mm/yyyy)	Year	Month					

PARTICULARS OF EXPERIENCE

15. Total Experience.....Years.....Months.

GENERAL INFORMATION

16. (a) Details of Salary being drawn in the present post as on the date of application:

Scale of pay	Date of entry in the scale	Date of next Increment	Basic Pay	Special Pay, if any	DA/ADA/VDA	Total

(b) Other allowances and Perks:						
CCA	Site/Project/ Construction Allowance	HRA	Annual Bonus %	Approx. monthly value of incentive bonus, if any	Value of other Perks e.g. free house/electricity/ Water etc.	Gross emoluments per month inclusive of all allowances and value of perks
<p>17. If retired from Govt. / defence Services, give details of pension/equivalent of pensionary benefits.</p> <p>18. (a) Basic Pay acceptable : _____ (b) Minimum time required to join, if selected: _____</p> <p>19. Are you prepared to serve anywhere in India? Yes / No</p> <p>20. Have you been an applicant for any post in this Company before? Yes / No If 'yes' Give the following details:</p>						
Employment Advertisement No.	Name of Post	If called, date of interview	Whether selected/ offered appointment	Remarks		

21. Have you ever been arrested in a criminal case or convicted, fined or imprisoned for violation of any law (excluding minor traffic violation) or is any disciplinary / vigilance case pending/ever instituted against you or have you been barred / disqualified by a Public Service Commission /University or any other educational authority form appearing in its examinations?

Yes / No

If yes, give details:

22. Are you related to any of the Directors of BCPL? Is any of your relatives employed in BCPL.

Yes / No

If 'Yes' give the following details:

Name	Designation	Place of Posting	Relationship

23. Have you ever been abroad? If so, give particulars:

Country visited	Date of Departure	Date of Arrival	Duration of Stay	Purpose of visit

24. Extra-Curricular Activities:

25. Details of Research Works, Books / Papers etc. Published, if any

26. References:

(These persons should be residents of India and holder of responsible positions and they should be intimately acquainted with your character and work but must not be relatives)

Sl No.	Name	Address	Occupation or Position
1.			
2.			

27. Any other relevant details/ information not covered above, that you may wish to furnish

28. List of documents attached (True copies)

I certify that

(a) The information furnished above is correct.

(b) I am / am not employed in Govt. /Statutory Organisation /Public Sector Undertaking

(c) My application has / has not been forwarded through proper channel.

(d) I am ready to join BCPL after resigning the post / retaining protective lien on my present post in Government / Public Undertaking.

(e) I am ready / not ready to serve in any units of BCPL, i.e. Lepetkata, Dibrugarh/ Duliajan, Dibrugarh/ Lakwa, Sivasagar.

Delete whichever is inapplicable.

Date

Signature of Applicant

FOR OFFICIAL USE ONLY

The entries regarding age, qualifications etc. made above have been verified by me with the originals and found correct. The following Degrees/Certificates/Testimonials have not been produced for verification.

Representative of HRD Deptt.

INSTRUCTIONS FOR FILLING THE APPLICATION FORM

Kindly make sure that all the instructions given below are complied with failing which your application is liable to be rejected.

1. All entries in this form should be typed or written neatly.
2. Submission of this form involves no commitment on either side and no correspondence with regard to the suitability or otherwise of the applicant will be entertained.
3. Application forms from employees of Government/Public-Sector Undertaking/Statutory Organizations must be sent through proper channel.
4. Incomplete application will not be considered.
5. Attested copies and testimonials should be attached with the form, if not already sent. All enclosures to the application form should preferably be of the size of application form and all the sheets be properly stitched or tagged. Original Degrees and testimonials should not be sent.
6. All the information given in the application form should be correct. Any mis-statement / Suppression of facts would render the candidate liable to rejection and termination after appointment.
7. Any change in address should be communicated to us. While every care would be taken to record the change in address, the Company will not accept any responsibility, whatsoever, for delivery of interview letter on changed address. The candidates should, therefore, arrange for redirection of communications to their changed address.
8. A recent passport size photograph should be affixed on the application form.
9. (a) Candidates belonging SC/ST/OBC communities should invariably attach attested copy of the certificate from one of the following authorities.
 - (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/City Magistrate*/Sub Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner.
* (Not below the rank of 1st Class Stipendiary Magistrate)
 - (ii) Chief Presidency magistrate/Additional Chief Presidency Magistrate / Presidency Magistrate
 - (iii) Revenue Officers not below the rank of Tehsildar.
 - (iv) Sub-Divisional Officer of the area where the candidate and /or his family normally resides.
 - (v) Administrator /Secretary to Administrator / Development Officer (Lakshadweep Islands)
 - (vi) Students belonging to OBC communities have to submit the undertaking that He or She do not belong to persons/ sections (Creamy Layer) in the enclosed format.
- (b) Candidates belonging to EWS should invariably attach attested copy of the certificate by an officer not below the rank of Tehsildar in the States/UTs.
10. Canvassing in any form will lead to disqualification.

Extra sheet can be added wherever space is insufficient.

DECLARATION FOR OBC CANDIDATES

“I, _____ son/daughter of
 Shri _____ resident of
 village/town/city _____ district _____
 _____ state _____ hereby declare that I belong
 to the _____ community which is recognized as a
 backward class by the Government of India for the purpose of reservation in services as per orders
 contained in Department of Personnel and Training Office Memorandum No.36012/22/93-Estt.
 (SCT), dated 8-9-1993. It is also declared that I do not belong to persons/ sections (Creamy Layer)
 mentioned in column 3 of the Schedule to the above referred Office Memorandum dated 8-9-1993.”

Signature of Applicant

Date _____