Mumbai Port Authority

ANNEXURE

Application Form

Application for the position of **VTS/Signal Assistant on contract basis**

Affix pass-port size photograph

1. Name (In block letters)   :

2. Address for communication   :

3. Permanent address   :

4. Telephone/Mobile / E mail Id   :

5. Date of Birth   :

6. Nationality   :

7. Whether belongs to SC/ST/OBC   :

8. Marital status (Married/Unmarried) :

9. Name of Father/Spouse   :

10. Educational/Professional and other :
    qualifications.
    (Self- attested certificates to be
    enclosed)

Name of examination	Year of passing	Percentage grade/class	No. of attempts	Name of Board/ University

11. Details of present and past employments/relevant experience [Self-attested certificates to be enclosed].

Name of the organisation	Post held	Scale of Pay /Annual pay	Period		Details of relevant experience
			From	To	

12. Proficiency in Computers [Self-attested certificates to be enclosed]:

Name of the course	Duration	Institution	Year of passing	Grade/ Percentage

13. Languages known	Marathi Hindi English	Read	Write	Speak

14. Employment Exchange Registration No.

15. Any other information desired to be : submitted by the applicant

Declaration

I do hereby declare that the particulars furnished above by me are correct to the best of my knowledge and belief. In the event of any information being found to be false or incorrect, my candidature/appointment may be cancelled/terminated without any notice.

Date :
Place :
Encl :   (Signature of the Applicant)

CERTIFICATE

(To be given by the Head of Department/Competent Authority)
(In case of applicants employed in Govt/Semi-Govt.
organizations/ PSUs/ Autonomous Bodies/MbPT)

      This is to certify that Shri_____is working as _____ in_____ since _____ ,fulfills the eligibility criteria of educational qualification and experience, as mentioned in the advertisement for the position of VTS/Signal/Assistant . The particulars furnished by him at Sl. Nos. 1 to 15 in the above application are verified and found to be correct.

      His/Her integrity is certified and he/she is clear from vigilance angle.

Date :   HEAD OF DEPARTMENT/
Place :   Competent Authority