For office Use:	Reg. No.	Dated: _	Fee: _	
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BROADCAST ENGINEERING CONSULTANTS INDIA LTD

(A Govt. of India Enterprise)

Head Office: 14-B, Ring Road, I.P. Estate, New Delhi-110002

Tel: + 91(11) 23378823-25, Fax No. + 91(11) 23379885 Corporate Office: BECIL Bhawan, C-56, A/17, Sector-62, Noida – 201307 Uttar Pradesh Tel: 0120-4177850 Fax: 0120-4177879

Website: www.becil.com

Please attach recent passport size photograph

(APPLICATION FORM)

			(PL	LEASE F	ILL IHIS	FORM	IN CAPITA	LLEIIE	RS ON	LY)				
l. <i>i</i>	Application for the	e post of:												
2. I	Name - Mr. / Mrs. /	/ Miss. (Pl	ease tick	the ap	propri	ate)								
	First Name					Middle Name Last Name					е			
3. I	Father's Name:													
	Fin	rst Name			Middle Name						Last Name			
l.	Date of Birth Day				Month					Year				
-	11.1		(1144)	_		·- • •		<i></i>						
5.	Universal Accor	unt Numb	er (UAN)	or Pre	vious F	'F IVIE	ember ID	(if any)	<u> </u>					
						(OR							
	Previous PF Region Code O' Member ID			Off	ffice Code Establishment ID E					Extensi	xtension Account No.			
•	F		N- <i>(:6</i>											
6.	Employee Stat	e insuran	CE NO. (IT	any)										
7.	PAN No. (com	oulsory)												
		,,												
8.	Aadhaar No. (d	compulso	ry)											
). (Category:	Gener	al 🔲	ОВС		C		ST		PH		Othe	r	
0. I	Marital Status:	Marrie	ed	Unma	rried									
1. C	Contact Number: _													
2. E	-mail:													

Note: All future communications will be at your above given Contact Number & Email only.

13. Nationality:					14. Religion:						
15. (Contact Details:										
PERMANENT ADDRESS					PRESENT ADDRESS						
но	USE NO.	Н	HOUSE NO.								
CIT	Υ:			С	CITY:						
STA	ATE:			S	STATE:						
PIN	l:			Р	PIN:						
16.	Educational Qua	ilifications:									
S. N o.	Qualification Details of Course			Во	ard / Univers	Year of Passing	Percentage				
1	X (10)	10)									
2	XII (10+2)										
3	Graduation										
4	Post- Graduation										
17.	Work Experience	e (if any):									
S.		Organization D				ition		Brief Job profile			
No	·				From To			-			
1.											
2.											
3.											

S.No.	Name	е	Ac	ldress	Cont	tact Number
1. Aruna	chal Pradesh 2		3. Goa			6. Manipu
			_		11. Laddakh 6	_
					6 12	
1. Language 1 2	Read	appropriate boxes d Spea		е		
i. Educationa ii. Birt iii. Cas iv. Wo v. Cop vi. Cop	I Certificates (Co h Certificate (Claste Certificate, if a rk Experience Ce by of PAN Card by of Aadhaar Ca	any. ertificates, if any.	egree)	iments with the	form:	