



ODISHA CONSTRUCTION CORPORATION LIMITED

(A Government of Odisha Undertaking)

APPLICATION FOR THE POST OF ACCOUNTS CLERK (CONTRACT)

SPECIAL DRIVE FOR ST CATEGORY

1. Full Name (In capital) :
2. Father's/Husband's Name :
3. Gender : 4. Date of birth : 5. Age as on : years
(As recorded in 10th or equivalent exam) (31.08.2020)

6. Category
(Tick ✓ mark in appropriate box)
- | | |
|----|--|
| ST | |
|----|--|

7. Address (with PIN code):

Present Address

Permanent Address

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8. Language - Speak :
- Write :

9. Contact details (a) Phone :
- (b) Email :

10. Qualification: (10th onwards) (Attach copy of certificates).

Sl. No.	Exam passed/ discipline	Name of the Board / University / Institute	Duration of course	Whether Regular course (Yes/No)	Year & month of Passing	Total marks	Marks obtained	% of Marks/ CGPA
	PGDCA							

(In case of CGPA/grades, please indicate equivalent percentage as per norms adopted by the University/Institute & attach a copy of such norm fixed by the concerned University/Institute)

11. Post Qualification Experience (Attach copy of certificates):

Sl. No.	Name & address of Organizations Worked	Post held	Duration of Experience (DD/MM/YYYY)		Total years & months of experience	Type of assignment handled/specific nature of work/duty performed.
			From	To		

DECLARATION

I Son/Daughter/Wife of
do hereby declare that all the statements made in this application are true and correct to the best of my knowledge and belief. In the event of any information being found false, my candidature/appointment is liable to be cancelled/ terminated without any notice to me.

Place:

Date:

(Full Signature of the Applicant)