For office Use:	Reg. No.	Dated:	Fee:	

BROADCAST ENGINEERING CONSULTANTS INDIA LTD



14. Mobile No

(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 E_Mail: contactus@becil.com

Website: www.becil.com

recent passport size photograph

Please attach

(REGISTRATION FORM)

(Imp: Please read the details on prescribed educational, professional as well as experience requirements for the various professionals before filling in the form) Registration for the post of:_ Name - Mr. / Mrs. / Miss. (Please tick the appropriate) 2. **First Name Middle Name Last Name** 3. Father's/Husband's Name (Please tick the appropriate): Date of Birth: Day Month Year 5. AGE: ____ 6. PAN No. (compulsory) 7. Aadhar No. (compulsory) Category: General OBC SC/ST PH Others **Unmarried** Marital Status: Married 10. Nationality:___ 11. Religion: 13. Present Address for Communication (Capital Letters): State Pin Code 12. Permanent Address (if any): State Pin Code 13. E-Mail Address (Capital Letters):

15	Education	al/Professio	onal Qualifica	ation
IJ.	Euucalion	ai/F1016551C	ılıal Guallika	11 IU

15.	Educational/Professional Qual	lification:			
S. No.	Qualification	University / Institute / College		Year of Passing	Division/ Grade
1	Senior Secondary School (SSC)				
2	Higher Secondary School (HSC)				
3	Graduation				
4	B.Sc. in Life Sciences				
5	Post-Graduate in Hospital Management (or Healthcare)				
6					
	Work Experience (add separat	e sheet if required):			
1.	Designation				
	Organization				
	Duration (DD/MM/YY)	From	То		
	Job profile				
2.	Designation				
	Organization				
	Duration (DD/MM/YY)	From	То		
	Job profile				
17.	Total years of experience:				
18.	References:				
S. No.	Name	Address	Co	ontact Num	nber
1.					
2.					
19.	Languages known other than Read	Hindi /English (Tick appropriate boxes) Speak Write	•		
	1				
	2				
	3				
Not	e: Please attach self-attested p	hotocopies of following documents wi	h the form (compu	lsorv):	

Please attach self-attested photocopies of following do

1. Birth Certificate or 10th pass certificate

2. Caste Certificate, if any.

3. Educational / Professional Qualification Certificates

4. Work Experience Certificates

5. PAN Card

6. Aadhar Card

7. Copy of EPF/ESIC Card (if already have)

Signature		
Siulialule		