



BHARAT ELECTRONICS LIMITED, CHENNAI-89
(APPLICATION FORM)

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Name of the post applied for: SECURITY (HAVILDAR)
Wage Group-III of Career Path-III. Pay Scale – Rs.20500 - 3% - Rs.79000

Trade (tick as applicable): a) ARMY b) NAVY c) AIR FORCE

1. Name of the Candidate : _____
2. Father's Name : _____
3. Date of Birth : _____
4. Age (as on 01.09.2020) : _____
5. Gender : _____
6. Nationality : _____
7. Religion (please specify) : _____
8. Category : _____ (GEN/OBC/EWS/SC/ST)
9. Contact details:

Permanent Address:	Correspondence Address:
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Telephone No: _____ Mobile No: _____

Email ID: _____

10. Date of joining Defence Service : _____

11. Date of Discharge from Defence Service : _____

12. Do you belong to minority community : Yes / No

(If yes, tick the appropriate)

Muslim/Christian/Sikh/Non-Buddhist/Zorastrian

13. Medical Category at the time of Discharge:

14. Please specify the following details:

a) Army / Navy / Air Force

b) Service No _____ Rank _____

c) Registration No. (Sainik Kalyan Board) _____

15. Character on Discharge:

16. Educational / Professional Qualification:

Education	Board / University	Year Studied		Year of Passing	Class / Grade	Special Subjects
		From	To			

17. Details of Courses / Cadres / Resettlement Courses undergone:

Name of the Course	Institution / Establishment	Period		Grading	Remarks	Nature of Work
		From	To			

18. Details of Additional Qualifications:

a) Fire Fighting

b) Computer literacy

c) Driving License

19. Present Employment Particulars (if any) :

Name of Employer	Rank / Designation Held	Period		Nature of work in Brief
		From	To	

a) Whether Govt/Semi Govt/Public Sector/Private Sector :

Details of Pay

Basic Pay

Dearness Allowance

House Rent Allowance

City Compensatory Allowance

Other

Total Emoluments per month

:
:
:
:
:
:
:

20. In the past, have you applied for any post in BEL (if 'YES' give details) :

21. Knowledge of Languages (highlight you mother tongue):

Sl. No	Language	Speak	Read	Write

22. Application Fee details :

SBI Collect Reference No : _____
(Please attach copy)

23. Additional Information (if any)
(Attach Additional Sheet if necessary)

24. Please give particulars of your relative employed in BEL, if any:

Name	Relationship	Designation	Department	Unit

UNDERTAKING

I hereby solemnly affirm that whatever information, that has been given above is true and correct to the best of knowledge and belief. I further state that if at any stage, it is discovered / revealed that any attempt has been made by me to willfully conceal or misrepresent that fact, my candidature shall summarily be rejected, or if employed, my employment be terminated.

SIGNATURE OF THE APPLICANT

NAME:

Date:

Place: