



TIDEL PARK COIMBATORE LIMITED

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PHOTO

REGD. OFFICE [For information]
TIDEL PARK "A" BLOCK NORTH,
I FLOOR, No. 4, RAJIV GANDHI SALAI
TARAMANI, CHENNAI - 600 113

OFFICE / IT PARK [For correspondence]
1st FLOOR, TIDEL PARK COIMBATORE ELCOSEZ,
AERODROME POST
COIMBATORE - 641 014

Post Applied for:

ASSISTANT MANAGER (INSTRUMENTATION)

PERSONAL DATA

1	Name in full (in Block Letters)	
2	Address for communication Phone No. Mobile No. E-mail ID:	
3	Permanent Address (If any change) Phone No.	
4	Place of Birth	
5	Date of Birth	
6	Age (as on 01.06.2017)	years

7. EDUCATIONAL DATA: EDUCATIONAL, PROFESSIONAL & TECHNICAL

Course	Name of the University/ Institute	Name of the School/ College	Examinations passed with month / year	Special subjects	Division & % of marks
SSLC (10 th STD)					
Plus Two / PUC					
Diploma (EIE)					
B.E (EIE)					
Others					

Copies of certificates and mark sheets to be enclosed

8. EMPLOYMENT DATA (CANDIDATE)**(Start with Present Employment)**

Sl. No.	Employer's Name & Address	Date of joining	Date of leaving	Position held	Nature of work	Last Salary drawn with break ups
1						
2						
3						
4						
5						
6						

9. Post Qualification Experience in the relevant field (BAS, IBMS and Facility & Services) in Industries / Multi-Storied Building, if any

Sl. No.	Name of the Company	Period (No. of years)	Nature of work
1			
2			
3			
4			
5			

10.	Marital Status: a) Name of the Spouse b) Whether employed c) If yes, details of spouse				
Name & Address of the Employer (Spouse)	Designation	Period of Service (Chronological Order)	Designation & Nature of work	Remarks	
11. No. of Children (if married)					
Sl.No.	Name of the Children	Age	Education Details		
12. DEPENDANT PARTICULARS:					
Sl.No.	Name	Date of Birth / Age	Relationship		
1					
2					
3					
4					
5					
6					

13. Family History (Blood Relations):				
Sl.No.	Name	Age	Employment Details, if any	
14. (i) Name of the Community:				
(ii) Whether belonging to SC/ST/MBC/BC/OC				
15. Languages known:				
Sl.No.	Name of the Languages	Speak	Read	Write
16. Reference: (atleast two references not related to the applicant and residing in India may be given):				
Sl.No.	Name	Address	Position	Tel.No.
17. Details of physical disability of Permanent nature or chronic illness, if any				

18. GENERAL

I	(a) Any relative or acquaintance working in this Corporation If yes, give details (b) Details of relatives working in other Public Sector Undertakings / Government	YES / NO
II	(a) Membership with Professional Institutions (b) Other Institutions	
III	Sports Proficiency	
IV	Any political affiliation, If so, give a brief detail	
V	Have you applied before to this Corporation?	
VI	Minimum gross emoluments acceptable	Rs.
VII	Minimum joining time required	

DECLARATION

I, solemnly declare that the details given above are true to the best of my knowledge and I will produce the supporting documents for the same and in case, if details given are found not correct, I shall abide by the action of the management.

Place:

Date:

SIGNATURE OF THE APPLICANT