



**APPLICATION FORM**

**\*Mode of Payment: Bank D.D. No/UTR No/TRN No.....Date.....**

**Bank Name: .....**

**( In favour of NIELIT Chennai, Payable at Chennai)**

Affix Passport  
Size Photograph

✓ **Processing Fee: Rs. 500/- for others and Rs. 250/- for SC-ST candidate per post per application**

**1. Mode of Payment:**

**2. Through online: Name of Account Holder: “NIELIT Chennai”, SB Account No. 31185720641,  
State Bank of India , Kottur (Chennai), IFSC:SBIN0001669**

**3. Through Demand Draft/Pay Order: In favour of NIELIT Chennai, payable at Chennai**

1. Name of the Post applied for

**[Please fill separate application for each post]**

2. Advertisement No. & Date : **NL-CHE\III\3(i)\2018\001, 31-07-2018**

3. Name of the candidate (In Block letters)

4. Father/ Husband's name

5. Date of Birth (DD-MM-YYYY)

6. Whether belongs to SC/ST/OBC/UR/PwD

7. Nationality

8. Present Postal Address with pin code  
(For correspondence in block letters)

9. Permanent Address

10. Phone No.

11. E-mail ID

**12. Educational Qualifications (10<sup>th</sup> class onwards)**

| Sl. No | Name of the Examination/ passed | Year of Passing | Name of the Board/ University | % of Marks | Division | Subject /Discipline in Engineering or Science / Other |
|--------|---------------------------------|-----------------|-------------------------------|------------|----------|---|
| 1      |                                 |                 |                               |            |          |   |
| 2      |                                 |                 |                               |            |          |   |
| 3      |                                 |                 |                               |            |          |   |
| 4      |                                 |                 |                               |            |          |   |
| 5      |                                 |                 |                               |            |          |   |
| 6      |                                 |                 |                               |            |          |   |

**14. Details of Employment (Work Experience)**

| Name of the Office/Instt./Orgn.   | Post Held | From     | To       | Total Experience | Pay Scale | Nature of duties |
|---|-----------|----------|----------|------------------|-----------|------------------|
|   |           | DD/MM/YY | DD/MM/YY | DD/MM/YY         |           |                  |
|   |           |          |          |                  |           |                  |
|   |           |          |          |                  |           |                  |
|   |           |          |          |                  |           |                  |
| <b>Total Experience in Years / Months /Days (Attach Additional Sheet if required)</b> |           |          |          |                  |           |                  |

**Declaration**

I affirm that information given in this application is true and correct. I also fully understand that if at any stage it is discovered that any attempt has been made by me to conceal willfully or misrepresent the fact (s), my candidature may summarily be rejected or employment terminated.

Place.....

Date .....

**Signature of the candidate**

**Note: - Self attested photocopy of certificates/ Testimonial is required to enclose with application.**

**(For Office Use)**

Verified by(Name and Signature)