

To,
The Advertiser
Oil India Ltd.
4, India Exchange Place,
Kolkata – 700 001, West Bengal

APPLICATION FORMAT

1.	POST APPLIED FOR					Paste recent 3 cm x 3 cm coloured photograph (sign across)
2.	POST CODE					
3.	NAME IN FULL (IN CAPITAL LETTERS)	a) FIRST NAME				
		b) MIDDLE NAME				
		c) SURNAME				
4.	GENDER (PLEASE TICK)	MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>				
5.	DATE OF BIRTH (DD/MM/YYYY)	___/___/_____				
6.	FATHER'S NAME					
7.	MOTHER'S NAME					
8.	PAN NO.					
9.	RELIGION					
10.	NATIONALITY					
11.	CASTE CATEGORY (PLEASE TICK)	a)	GENERAL <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC (NCL) <input type="checkbox"/> EWS <input type="checkbox"/>			
		b)	SC/ST/OBC (NCL)/EWS CERTIFICATE NO. _____ DATE: _____			
12.	SUB CASTE (COMMUNITY)					
13.	MARITAL STATUS					
14.	I. WHETHER PERSONS WITH DISABILITIES (PWD) (PLEASE TICK)	YES <input type="checkbox"/> NO <input type="checkbox"/>				
	II. IF YES, FOLLOWING DETAILS: CATEGORY OF PERSONS WITH DISABILITIES (PWD) (PLEASE TICK)	VH (LV) <input type="checkbox"/>	OH <input type="checkbox"/>		III. PERCENTAGE OF DISABILITY (%): _____ %	
		HH <input type="checkbox"/> MD <input type="checkbox"/>	OA <input type="checkbox"/>	OL <input type="checkbox"/>		OAL <input type="checkbox"/>
15.	I. WHETHER EX-SERVICEMAN (PLEASE TICK)	YES <input type="checkbox"/> NO <input type="checkbox"/>				
	II. IF YES,	DATE OF ENROLLMENT	DATE OF DISCHARGE	NAME OF ZILA SAINIK	REGISTRATION	DATE OF

	FOLLOWING DETAILS	IN DEFENCE	FROM DEFENCE	WELFARE OFFICE	NO.	RENEWAL	
16.	EDUCATIONAL QUALIFICATION (AS APPLICABLE)	QUALIFICATION	BOARD / INSTITUTE / UNIVERSITY	DURATION OF COURSE (IN YEARS)	YEAR OF PASSING	PERCENTAGE OF MARKS OBTAINED / CGPA	
	CLASS 10 TH						
	CLASS 10+2						
	COMPUTERS CERTIFICATE / DIPLOMA						
	OTHERS						
17.	EXPERIENCE, IF ANY	NAME & ADDRESS OF THE ORGANIZATION	POST / DESIGNATION HELD	PERIOD OF SERVICE		NATURE OF DUTIES	PLACE OF POSTING
				FROM	TO		
18.	EMPLOYMENT REGISTRATION DETAILS						VALID UPTO
19.	PERMANENT ADDRESS (IN BLOCK / CAPITAL LETTERS)	NAME – C/O. (IF ANY) – VILLAGE / TOWN / PLACE – P.O. – P.S. – DIST. – STATE – PIN –					
20.	PRESENT MAILING / CORRESPONDENCE ADDRESS (IN BLOCK / CAPITAL LETTERS)	NAME – C/O. (IF ANY) – VILLAGE / TOWN / PLACE – P.O. – P.S. – DIST. – STATE – PIN –					
21.	VALID E-MAIL ADDRESS, IF ANY						
22.	MOBILE NO.						

I HEREBY DECLARE THAT THE PARTICULARS STATED IN THE ABOVE APPLICATION FORM ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND NOTHING HAS BEEN CONCEALED OR INCORRECT INFORMATION HAS BEEN FURNISHED. IN CASE ANY OF THE INFORMATION FURNISHED BY ME IN THIS APPLICATION IS FOUND TO BE FALSE, INCORRECT AND MISLEADING AT ANY TIME AFTER SUBMISSION OF THE SAME, I SHALL BE FULLY RESPONSIBLE FOR THE SAME AND HAVE NO OBJECTION AGAINST THE CANCELLATION OF MY CANDIDATURE. I WILL MAKE NO CLAIM FOR APPOINTMENT AGAINST THE POST AND SHALL ALSO HAVE NO OBJECTION FOR TAKING ANY LEGAL ACTION AS DEEMED FIT BY OIL INDIA LIMITED.

Date:

Signature of Applicant

Important notice to all candidates

Candidate(s) are hereby cautioned not to fall prey to the dubious agencies/organizations / individuals attempting to defraud job seekers by issuing fake appointment letters or assuring jobs in Oil India Letters(OIL). OIL does not authorized any agency/organization/individual outside of OIL to offer any job on its behalf. OIL will not be responsible for any loss/ damage suffered either directly or as a consequence of such fake offers from any source whatsoever.

All future announcement pertaining to above notification would be published in OIL website www.oil-india.com and not on any other website/medium.