



BIO-DATA FORM

Advt. No.: BDL/C – HR (TA & CP)/ADVT. No.2023-5



Online Registration No. : _____

Name of the Post applied for: _____

Working in Govt. Organizations / PSU: Yes No

In case of 'Yes', whether applied through proper channel: Yes No

Please attach a copy of the forwarding letter of the employer or NOC

1	Name of the Candidate (as per X th Class certificate in capital letters)			
2	Date of Birth (DD/MM/YYYY)	AGE as on	27.07.2023	
3	Father's Name (as per your X th Class certificate) & Occupation			
4	Present Address (for correspondence)			
5	Permanent Address			
6	Phone No. / Mobile No.			
	Alternate Contact No.			
7	e-Mail ID (Mandatory)			
8	Nationality			
9	Religion			
10	Place of Birth & State			
11	Marital Status			
12	Specify the category you belong to (tick)	UR / EWS / OBC/SC/ST		
13	Are you a Person with Benchmark Disability (PwBD). If yes, please specify the disability %	Yes <input type="checkbox"/> No <input type="checkbox"/> , If yes _____ % of disability & PwBD Category _____		
14	Are you an Ex-Servicemen (if yes, pl. specify no. of years of service)	Yes <input type="checkbox"/> No <input type="checkbox"/> No. of years: <input type="text"/>		
	Please tick on your branch in Defence Service	ARMY / AIRFORCE / NAVY		

Signature: _____



BHARAT DYNAMICS LIMITED

15. Educational Qualifications (Declare all the qualifications, which you possess and pursuing). Also, indicate period of gap in academics, if any, and reason for the break.

Sl. No.	Qualification (X th Class onwards)	Subjects / Specialization	i. Period of Study (From (MM/YY)_To (MM/YY) ii. Total duration of the Course	University/ Institution & Address	Full Time / Correspondence / Evening classes/ Part Time	Month & Year of Passing (as per certificate)	Percentage (%) of Marks secured (average of total marks obtained in all semesters/years)	Course is Recognized by UGC / AICTE/ DEC / State Govt. / Central Govt. (please specify)
1.								
2.								
3.								
4.								
5.								

(Rows may be added if necessary)

I hereby declare that I do not possess any other qualifications and also not pursuing any other course. I may be terminated without notice if Management found that I have concealed any higher qualification, which I have possessed before joining the Company and also pursuing higher qualification at the time of joining the Company (Please attach additional sheet, if required).

Signature: _____

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16. **Post/Designation wise & Company/Firm wise Experience details to be mentioned, if any** (Start from Present Employer/Company). Management Trainee/ Probationary Trainee/ Apprenticeship/ Training period, if any, during the course of employment, should be indicated separately.

S. No.	i. Name of the Organisation / Firm. ii. Address iii. STD code & Telephone No. iv. e-mail.	Central / State / PSU / PSB/ Private	Designation / Post held	i. Scale of Pay ii. Basic iii. DA iv. Gross Salary per month (in case of Private sector employees)	Contract / Trainee / Tenure / Permanent (6)	i. Provident Fund No., ii. Universal Account No. iii. EPF Office address (7)	Period of Service		Total Period of Service (Years – Months) (10)	Reasons for leaving (11)
							From (dd/mm/yyyy) (8)	To (dd/mm/yyyy) (9)		
(1)	(2)	(3)	(4)	(5)						
1.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						
2.	i.			i.		i.				
	ii.			ii.		ii.				
	iii.			iii.		iii.				
	iv.			iv.						

(Rows may be added if necessary)

I hereby declare that I have written correct experience details. I may be terminated without notice if Management found that I have concealed/ wrong experience details mentioned the above experience details column. **(Note:** If the post & Company wise experience details are more than 07 rows, please furnish the experience details in additional sheet(s)).

Signature: _____



BHARAT DYNAMICS LIMITED

17	Any of your relative working in BDL (tick) (if yes, specify details)	Yes <input type="checkbox"/> No <input type="checkbox"/> NAME: Staff No.:
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DECLARATION

I hereby declare that the information stated above by me is true, complete to the best of my knowledge and belief. In case, the information stated above by me is found to be false or incorrect, my candidature, appointment may be considered as revoked / terminated at any stage of recruitment process or after recruitment / joining.

Date:

Signature:

Place:

Name of the Candidate: _____

Enclosed: Copy of Educational / Technical Qualifications along with Marks Sheets, Category certificate, Experience Certificate, NOC (if any), etc.