

आईआरईएल)इंडिया)लिमिटेड/**IREL (India) Limited**

**(Formerly Indian Rare Earths Limited)**

**(A Government of India Undertaking)**

**Department of Atomic Energy**

**Affix your recent passport size photograph**

**OSCOM Unit, Matikhalo, Ganjam, Odisha**

**Notification No: IREL/OSCOM/AUA/2021/2**

**Date of Notification: 08 FEB 2021**

**Last date for receipt of application: 25 FEB 2021**

**APPLICATION FOR ENGAGEMENT AS**

**TRADE/ TECHNICIAN/GRADUATEAPPRENTICE**

**(TO BE PRINTED BACK TO BACK ON SAME SHEET OF PAPER)**

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| **Ser** | **Particulars** | **Details** |
| 1. | Portal Registration Number |  |
| 2. | Aadhar Number |  |
| 3. | Name in Full |  |
| 4. | Father’s/ Husband’s Name |  |
| 5. | Mother’s Name |  |
| 6. | Nationality |  |
| 7. | State of Domicile |  |
| 8. | Gender | Male/ Female |
| 9. | Marital Status | Married/ Unmarried/ Widow/ Widower/ Divorcee |
| 10. | Date of Birth |  |
| 11. | Age as on 25 Feb 21 |  |
| 12. | Category | Gen/ OBS (NCL)/ SC/ ST/ PWD/ EWS |
| 13. | Religion |  |
| 14. | Present Address |  |
| 15. | Permanent Address |  |
| 16. | Contact Details | Landline: | Mobile: | E-mail: |
| **17.** | **Educational Qualifications:** |
| **Ser** | **Examination Passed** | **Name of Institute** | **Year of Passing** | **Marks Obtained** | **% of Marks** |
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| 18. | Whether land Displaced | Yes/ No(If Yes, provide documentary proof of having given land to IREL (India) limited) |
| 19. | Whether belonging to peripheral villages within 10 KM radius from OSCOM | Yes/ No(If Yes, please provide copy of nativity/ Residential Certificate) |
| 20. | Whether Ward of IREL Employee | Yes/ No |
| If Yes | Name of Parent: | Employee No: |
| 21. | Languages Known | Mother Tongue: |
| Other Languages: (Read/ Write/ Speak) |
| **22.** | **Self-Declaration:** |
| I hereby declare, that the facts given by me above are, to the best of my knowledge, correct. If any of the facts herein mentioned are found to be incorrect or false at a future date, my engagement in IREL (India) Limited may be terminated.Place:Date: Signature of Individual |