

## **UJVN** Limited

(An Uttarakhand Govt. Enterprise)

## <u>APPLICATION FOR MANAGEMENT TRAINEE</u> (Only from Institute of Company Secretary of India)

Note: Please submit details in Capital letters only)

Candidate's self attested photograph

4.5CmX3.5Cm

| 1 | Name of candidate           |                              |         |       |           |       |          |         |      |     |    |
|---|-----------------------------|------------------------------|---------|-------|-----------|-------|----------|---------|------|-----|----|
|   | (in Capital Letters)        |                              |         |       |           |       |          |         |      |     |    |
|   | (Leave one Blank Space)     |                              |         |       |           |       |          |         |      |     |    |
|   |                             |                              |         |       |           |       |          |         |      |     |    |
| 2 | Father's/Husband's          |                              |         |       |           |       |          |         |      |     |    |
| - | Name                        |                              |         |       |           |       |          |         |      |     | -  |
|   |                             |                              |         |       |           |       |          |         | İ    |     |    |
| 3 | Date of birth & age as on   | th & age as on Date of birth |         |       |           |       |          |         |      |     |    |
|   | 01-07-2022                  | _                            | :       | Year  | S         |       | Mo       | nths _  |      | _Da | ys |
| 4 | Gender (Please tick):       | 1-Male                       |         |       | 2-Female  |       |          |         |      |     |    |
| 5 | Permanent Address           |                              |         |       |           |       |          |         |      |     |    |
|   |                             |                              |         |       |           |       |          |         |      |     |    |
|   |                             |                              |         |       |           |       |          |         |      |     |    |
|   | - <u> </u>                  | _PIN                         | ž       |       |           |       |          |         |      |     |    |
| 6 | Correspondence Address      |                              |         |       |           |       |          |         |      |     |    |
|   |                             | 1                            |         |       |           |       |          |         |      |     |    |
|   |                             |                              |         |       |           |       |          |         |      |     |    |
|   |                             | PIN                          |         |       |           |       |          |         |      |     |    |
| 7 | Phone No with STD Code      | Office                       |         | ]     | Residence |       |          |         |      |     |    |
|   |                             | MobileFax                    |         |       |           |       |          |         |      |     |    |
|   | Email ID                    | гах                          |         |       |           |       |          |         |      |     | _  |
|   |                             |                              |         |       | - 1       |       |          |         |      |     |    |
| 8 | Category: (Gen./SC/ST/OB    | Ċ                            |         |       |           |       |          |         |      |     |    |
| 0 | (In case of SC/ST/OBC, ple  |                              | nit a c | ony c | of Cas    | te Ce | ertific  | rate is | sued |     |    |
|   | from the competent authorit |                              |         |       |           |       | -1 01111 | 10      |      |     |    |

| S1.   | Examination            | Year of      | Institute/         | Main                | Total           | Remarks |
|-------|------------------------|--------------|--------------------|---------------------|-----------------|---------|
| No    | passed                 | passing      | Board /            | subjects            | Aggre-          | if any  |
|       |                        |              | University         |                     | gate %          |         |
|       |                        |              |                    |                     | of marks/       |         |
|       |                        |              |                    |                     | Division        | 1000    |
|       |                        |              |                    |                     |                 |         |
|       |                        |              | ,                  |                     |                 |         |
|       |                        |              |                    |                     |                 |         |
|       |                        |              |                    |                     |                 |         |
|       |                        |              |                    |                     |                 |         |
|       |                        |              |                    |                     |                 |         |
|       |                        |              |                    |                     |                 |         |
|       |                        |              |                    |                     |                 |         |
| 1.    | Computer Pro           | oficiency, i | f any:             |                     |                 |         |
| 2.    | Any other Information: |              |                    |                     |                 |         |
| )ecla | aration                |              |                    |                     |                 |         |
|       |                        | C 1          |                    | re that the particu |                 |         |
|       |                        |              | vledge and belief  |                     |                 |         |
| -     |                        |              | iven herein being  |                     |                 |         |
| n the | e particulars be       | ing detecte  | elled and in the e |                     |                 |         |
| able  | to be terminate        | ed without   | any notice.        |                     |                 |         |
| ate:  |                        |              |                    |                     |                 |         |
| lace  | :                      |              |                    |                     |                 |         |
|       |                        |              |                    | Signati             | are of the cand | idate   |