

## **ELIGIBILITY CRITERIA**

### **ADVERTISEMENT FOR RECRUITMENT ON OUTSOURCING BASIS (CONTRACT)**

### **CHHATARPUR DISTRICT**

**Last date of submitting Application Date 20/03/2020**

**Forms will be accepted only before 05:00 PM**

Applications are invited for eligible candidates on e-mail or hard copy delivery at the following Address:-  
**Plot No.55, Saluja Complex, 1<sup>st</sup> Floor, Zone-1, M.P. Nagar, Bhopal - 462011. Madhya Pradesh (India)**  
Helpline No. : +91-755-4237403.  
Email: [mpconsultancy.bpl@gmail.com](mailto:mpconsultancy.bpl@gmail.com)

**Note: - While sending mail please make sure to mention Post in subject otherwise form will not be accepted.**

S. No.	Designation	Qualification	Experience
1.	Technical Assistant	Graduation from any Affiliated College/Institute/ University and DCA/PGDCA from any Affiliated College/Institute.	1. Should have at least 3 year of experience in relevant field 2. Hindi/English typing is must. 3. Should have good computer knowledge (MS Word, Excel, PowerPoint, Internet, etc)
2.	M.T.S. (Multi Tasking Work)	10th from any institution or affiliated board	Should have at least 2 year of experience in relevant field

**Note: Result awaited candidates (no need to apply).**

#### **Terms & Condition:**

1. Contract employment as mentioned above will not confer any claim for regular employment in organization.
2. Applicants need to submit a set of 2 sets of CV with photograph, eligibility qualification mark sheets, degrees, experience certificates and other relevant testimonials as mentioned in application form. The original documents will be verified at the time of interview (with two set of self-attested Photography/Xerox).
3. No travelling allowance will be paid to the candidate for attending the interview.
4. PVR & Medical fitness report to be submitted before the joining of the selected candidates.

# APPLICATION FORM

## ADVERTISEMENT FOR RECRUITMENT ON OUTSOURCING BASIS (CONTRACT)

**E-mail- [mpconsultancy.bpl@gmail.com](mailto:mpconsultancy.bpl@gmail.com) Phone No.:- 0755-4237403**

(Duly filled application should be sent through ordinary post/Speed Post/Hand Delivery only at prescribed address)

**Please read the terms and conditions carefully and fill the Application Form in Capital Letters in Black Ball Point Pen only.**

**The Candidate should be Indian National.**

<b>POST APPLIED FOR</b>	
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**1. CANDIDATE'S NAME** (please keep one box blank between first name, middle name & surname)

(FIRST NAME)	(MIDDLE NAME)	(LAST NAME)
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**2. FATHER'S NAME**

(FIRST NAME)	(MIDDLE NAME)	(LAST NAME)
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**3. GENDER** (Tick in box): MALE  FEMALE

**4. MARITAL STATUS** (TICK ✓ ONE OF THE BOXES)  
SINGLE  MARRIED  WIDOW  DIVORCE

**5. SPOUSE NAME** (IF MARRIED)

**6. NUMBER OF CHILDREN:**

**7. CATEGORY** Please ( ) tick one Box: UR  ST  SC  OBC

(For item nos. 8 to 11 WRITE "YES" OR "NO" IN THE BOX)

**8. DOMICILE OF M.P.:**

**9. HANDICAP:**

**10. DATE OF BIRTH:**

**11. AADHAR CARD :**

**12. ADDRESS FOR COMMUNICATON (IN CAPITAL LETTERS)**

Name:.....
F/H Name: - .....
Address:-.....
City/Town/Village:- ..... Distt: - .....
State: - ..... Pin Code: <input type="text"/>

Please affix one recent  
Photograph with  
Attestation

**13. CONTACT DETAILS**

STD Code: ..... Ph. No.....  
Mobile No. ....  
Email ID.....

**Signature of Candidate**

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(2)

14. CANDIDATE'S PERMANENT ADDRESS: SAME AS ABOVE

<b>Name:</b> - .....
<b>F/H Name:</b> - .....
<b>Address:-</b> .....
<b>City/Town/Village:-</b> ..... <b>Distt:</b> .....
<b>State:</b> - ..... <b>Pin Code:</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

15. STATUS OF ACADEMIC QUALIFICATION

Name of Examination passed(from 12th onwards)	Course	Year of Passing	Total Maximum Marks of the course	Total Marks obtained in all group/ years by the candidate	%age of Aggregate marks/ Grade obtained in final year/ final Examination	Institute / university
12th / intermediate, pre-university						
Graduation						
Post Graduation						
Other						

16. EXPERIENCE DETAILS (Please indicate post qualification experience only):

POST	NAME OF ORGANIZATION	Nature of duties	Period	Salary (Rs. Per Month)

DECLARATION:-

I hereby declare that the above particulars are true in every respect and nothing has been concealed or withheld by me. If any information furnished above is found false at any time, my candidature/appointment may be cancelled without any notice and legal action may be taken accordingly.

ENCLOSURES: (PLEASE TICK (✓) THE ITEMS ATTACHED, IN THE BOX. ATTESTED COPIES OF SERIAL NO.1 TO 9)

- M.P. DOMICILE CERTIFICATE
- CERTIFICATE FOR PROOF OF DATE OF BIRTH
- ADHAR CARD
- HANDICAPPED CERTIFICATE
- MARK SHEET FOR ALL GROUP OF EXAM/YEARS
- CASTE CERTIFICATE (SC/ST/OBC)
- NOC OF EMPLOYER (IF APPLICABLE)

PLACE:

DATE:

Signature of Candidate

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