

Application Form (Advt. No. 03/2023)

Paste recent
passport sized
photograph

Name of the Institution	Bardhaman Co-op. Milk Producers' Union Ltd
Name of the Post	Accountant

Personal Details

1.	Name of the Candidate								
2.	Father's name								
3.	Full postal address for communication								
4.	Date of Birth	D	D	M	M	Y	Y	Y	Y
5.	Proof of Age								
6.	Gender (Please tick)	Male				Female			
7.	Category (Please tick)	I	II	III	IV	V	VI	VII	
		UR	UR(EC)	ST	SC	SC(EC)	OBC-A	OBC-B	
8.	Certificate issuing authority (In case of II to VII of 6)								
9.	Photo-Identity proof produced (With No.)								
10.	Contact No.								
11.	E-mail ID								
12.									

➤ Academic Qualification

Exam. Passed	Board/University	Year/Date of passing	% of Marks/Grade
MP or Equivalent			
HS or Equivalent			
Graduation			
Post-Graduation			
Any others			

Full signature of the candidate with date

➤ **Technical/Computer Qualification**

Name of the Course	Institute/University	Year/Date of passing	% of Marks/Grade

➤ **Professional Qualification (if any)**

Name of the Course	Institute/University	Year/Date of passing	% of Marks/Grade

➤ **Experience (if any)**

Sl No.	Name of the Institution	Designation/ Post	Job Description	Duration

➤ **List of documents produced:**

1.		7.	
2.		8.	
3.		9.	
4.		10.	
5.		11.	
6.		12.	

Declaration by the candidate

I do hereby declare that the information furnished above is true to the best of my knowledge and belief. I do hereby undertake that the Commission may debar me from participating in the Selection Process at any stage and also take any legal action for submission of any information or document if it is found false/wrong.

Full signature of the candidate with date