

TAMIL NADU NEWSPRINT AND PAPERS LIMITED

UNIT-I: Kagithapuram, Karur District - 639 136. UNIT-II: Mondipatti Village, K.Periyapatti Post, Manapparai Taluk, Trichy Dt – 621306. Corporate Office: 67, Anna Salai, Guindy, Chennai - 600 032.

POST APPLIED FOR:

ADVT. REF.: ADVT. DATE: Paste recent passport size colour photograph

BIO DATA FORM

| | | NIII. | | | | | | | | |
|--|---|--|--|------------|----------|--|----|--|--|--|
| FULL NAME : (In Capital) | | | | | | | | | | |
| Applicants should en proof for Date of Educational Qualificat Percentage of Marks, E. required) etc., along wit | Birth, Community, ions, Class & xperience (wherever | Address for Communication: | | | | | | | | |
| Bio data form with insurproof will be summarily | • | Contact No: | | | | | | | | |
| Age : | Date of B | irth : | Nationality : | | | | | | | |
| | Place of I | irth: Religion : | | | | | | | | |
| State in India to when the India to when the state in India to when the sta | nich you belong | Member of GT BC Specify community: | BCM | MBC DNC | SC | SCA | ST | | | |
| SEX | MARITAI | FATHER / HUSBAND – NAME, OCCUPATION & ADDRESS: | | | | | | | | |
| MALE FEMALE | SINGLE | | | | | | | | | |
| OTHERS | MARRIED | DIVORCED | | | | | | | | |
| NO.OF.CHILDREN | I NO | AGE | | | | | | | | |
| MALE | | | | | | | | | | |
| FEMA | DEPENDENT F | PARENTS : | Yes | No | | | | | | |
| LIST OF LANGUAGES KNOWN (MOTHER TONGUE FIRST) SPEAK READ WRITE SPEAK READ WRITE | | | | | | | | | | |
| QUALIFICATION | - Start With Hig | hest & Details UPTO | S. S. L. C. | | | | | | | |
| Exams Passed Class / 0 | Percentage / | | itution & University Month / Year of passing | | Subjects | Wheather studied in Fulltime / Part-time / Distance Education | | | | |
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| | | | | | | | | | | |
| Apprenticeship & Training (Nature & Duration, Institution) | | | | | | | | | | |
| | | | | | | | | | | |
| Have you ever been Criminal Case / Arres Convicted ? If so give | ted / Remanded / | | | | | | | | | |

EMPLOYMENT HISTORY (Start from Present Employment)

In the employment history, the applicants should furnish details of name & address of the organization, designation, period of employment, nature of experience in relation to our experience norms, salary drawn, etc., without fail. Applicants can furnish these details in separate sheet.

| Name and Address of the organizati | Period of E | Period of Employment | | Position/s held | Total Salary | Nature of Work | | | | | |
|--|------------------|----------------------|-----------------|------------------|-------------------|----------------|--|--|--|--|--|
| Traine and Address of the organizati | From | То | Total Period | | drawn.(p.m) | or evolt | | | | | |
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| Have you applied for any position in TNPL earlier? | | | | | | | | | | | |
| | | | | | | | | | | | |
| No Yes Date Applied: Position: Date Interviewed: | | | | | te Interviewed: | | | | | | |
| When can you join TNPL, if se | lected? | | | | | | | | | | |
| | | | | | | | | | | | |
| Can we refer to your employer | rs? | | | | | | | | | | |
| Present Yes | No | | I | Previous | Yes | No | | | | | |
| Have you any relatives working | g in TNPL? If ye | es give deta | ails below: | | | | | | | | |
| Name | | Emp.No | | | Designation | | | | | | |
| 1. | | | | | | | | | | | |
| 2. | | | | | | | | | | | |
| REFERENCES List names of p | ersons other tha | n relatives o | r Former employ | ers who know you | u two years or lo | nger | | | | | |
| Name Address | | | | Position | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Employment Exchange (if Registered) | ace: | | | Re | g. No: | | | | | | |
| 1 | | | ECLARATIO |)N | | | | | | | |
| I hereby declare that the above particulars furnished by me are true to the best of my knowledge and belief and these will form the basis of | | | | | | | | | | | |
| employment if I am employed by Tamil Nadu Newsprint and Papers Limited. I am aware that any particulars furnished by me is found incorrect at any stage or correct information is found to be suppressed, I am liable to be terminated forthwith without any notice. | | | | | | | | | | | |
| PLACE: | | | | | | | | | | | |

SIGNATURE OF THE APPLICANT

DATE: