



CHLORITECH INDUSTRIES. (NDSR)

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EMPLOYMENT APPLICATION DATA FORM

ALL FIELD MARKED * ARE MANDATORY

*Post applied for: _____

Referred By: _____ Grade _____

RECENT
PASSPORT
SIZE
PHOTOGRAPH

PERSONAL DATA:

Name: Mr./Ms./Mrs. _____
(First Name) (Middle Name) (Last Name)

*Date of Birth: _____ Age: _____ Years Place of Birth: _____
DD/MM/YY (District/State)

Nationality: _____ *Gender: _____ *Marital Status: _____
(Male/Female) (Single/Married)

*Present Address: _____ *Permanent Address: _____

Pin: _____ Pin: _____
*Phone: _____ *Phone : _____
E-mail: _____ *Mobile: _____

***Emergency Contact Number- whom can we call in case of an emergency.**

Name: _____ Relationship _____ Contact No. _____

Name: _____ Relationship _____ Contact No. _____

LANGUAGES (Underline mother tongue)	KNOWN	SPEAK	READ	WRITE

Signature of Applicant. _____

*** FAMILY BACKGROUND**

Relationship	Name	Age	Employer/Occupation	Dependents (Yes/No)
Father				
Mother				
Spouse				
Sister				
Brother				

*Family Income (Per Month): _____ (In Rs.)

*No. of Children: _____

*** ACADEMIC QUALIFICATION**

Level	Name of the School/Collage/Institute and Location	Name of Exam passed	University/Board	Period		Class/Grade/Percentage
				From Mth. Yr.	To Mth. Yr.	
Post Graduation						
Graduation						
XII						
X						

Do you intend to study further? _____
Yes/No

Special Training if any (Project Work, Course Assignments, Technical Training):

Extra-Curricular Activities/Hobbies/Interest: _____

Other Achievements: _____

*** MEDICAL HISTORY**

Are you now or have been treated for any illness (e.g. Diabetes, Cardiac Problems, High BP) _____

Do you have any physical disabilities? Yes/No. (If yes, state details): _____

Signature of Applicant. _____

***SELF DECLARATION**

*Have you ever been convicted for any criminal offenses in any country? **Yes/No**

If yes, state details : _____

Have you ever been dismissed or terminated from any job? **Yes/No**

If yes, state details : _____

***Employment details (Start from last position held)**

Name and full address of each Employer	Contact No. (Office)	Position(s) Held	Period		Final Salary	Reason(s) for Leaving
			From Mth. Yr.	To Mth. Yr.		
1.						
2.						
3.						
4.						

Briefly outline your job responsibilities.

Describe what you would consider to be your most significant contribution at work:

* Total work Experience : Year _____ & Month _____.

DETAILS OF PRESENT EMOLUMENTS:

*Current/Last Drawn Salary: (Per Month): Gross: _____ Net: _____

*Expected Salary: (Per Month): Gross: _____ Net: _____

Signature of Applicant. _____

***CURRENT INDUSTRY TYPE:**

IT: _____ Chemical: _____ Pharma: _____ Other Manufacturing: _____

Retail: _____ Engineering: _____ Medical/Advertising: _____ Airline: _____

Domestic/International Call Centre: _____ Banking: _____

When can you join, if selected? _____

Are any relatives employed in firm? _____

Have you applied to us earlier? If yes, please give details about position applied for, when and outcome etc. _____

***Give three references who know you well. One must be the name of your superior in any previous employment.**

Sr. No.	Name	Position/Designation	Full Address	Telephone No.
1.				(R/O) (M) (Email)
2.				(R/O) (M) (Email)
3.				(R/O) (M) (Email)

Any further information you may wish to provide

I hereby affirm that all the information in this form is true. I will be required to provide evidence regarding there would be willing to do so. I haven't suppressed any material facts. I understand that if any particulars supplied by me in this form are found untrue; I am liable for termination from my job with your organization.

Place: _____

Date: _____

Signature of Applicant. _____