

**PUDUCHERRY CORPORATION FOR THE DEVELOPMENT OF WOMEN  
AND DIFFERENTLY ABLED PERSONS LTD.,**

(A Govt. of Puducherry Undertaking),

No.30, 2<sup>nd</sup> Cross Street, Pon Nagar, Reddiyarpalayam, Puducherry-605 010, Ph.No.0413-2203155.

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**APPLICATION FOR THE POST OF PROJECT ADVISOR / STATE CO-ORDINATOR /  
RESEARCH OFFICER AND DATA ENTRY OPERATOR FOR ONE YEAR ON CONTRACT BASIS**

- Note: i) Read notification before filling in the application  
ii) Candidates should submit separate application for each post  
iii) To be filled in by the Candidate in BLOCK LETTERS  
iv) Attested Copies of relevant certificates should be enclosed

|                                                                             |  |                   |                                                                              |                   |
|-----------------------------------------------------------------------------|--|-------------------|------------------------------------------------------------------------------|-------------------|
| Application for the Post of<br>(Separate application for<br>Specific Posts) |  |                   | Affix a recent passport size<br>Photograph attested by a<br>Gazetted Officer |                   |
| Applicant's Name<br>(on Block Letters)                                      |  |                   |                                                                              |                   |
| Address for Correspondence                                                  |  | Permanent Address |                                                                              |                   |
|                                                                             |  |                   |                                                                              |                   |
| Phone/Mobile<br>Number                                                      |  | E-Mail ID         |                                                                              |                   |
| Date of Birth                                                               |  | Sex               | Male                                                                         | Marital<br>Status |
| Place of Birth                                                              |  |                   | Female                                                                       |                   |
| Mother's Name                                                               |  | Father's<br>Name  |                                                                              |                   |

**Educational Details-Attach Attested Photocopies of Certificates and Mark sheets**

| Qualification                 | Name of<br>the Board/<br>Universities | Year | College/<br>University | Subject/<br>Specializ<br>ation | % / Grade/<br>Division | Full time/<br>Part time/<br>Distance<br>Learning |
|-------------------------------|---------------------------------------|------|------------------------|--------------------------------|------------------------|--------------------------------------------------|
| Secondary/<br>Matriculation   |                                       |      |                        |                                |                        |                                                  |
| Higher<br>Secondary<br>(10+2) |                                       |      |                        |                                |                        |                                                  |
| Graduation                    |                                       |      |                        |                                |                        |                                                  |
| Post Graduation               |                                       |      |                        |                                |                        |                                                  |
| Any Other                     |                                       |      |                        |                                |                        |                                                  |

...2.,

| <b>Employment Details (Previous) - Attach Photocopies of Experience Certificate</b> |                    |                                     |               |           |
|-------------------------------------------------------------------------------------|--------------------|-------------------------------------|---------------|-----------|
| <b>Name of the Organisation</b>                                                     | <b>Designation</b> | <b>Key Responsibilities Handled</b> | <b>Period</b> |           |
|                                                                                     |                    |                                     | <b>From</b>   | <b>To</b> |
|                                                                                     |                    |                                     |               |           |
|                                                                                     |                    |                                     |               |           |
|                                                                                     |                    |                                     |               |           |
|                                                                                     |                    |                                     |               |           |

| <b>Current Employment – Attach Proof of current employment</b> |                    |                                 |                     |                             |
|----------------------------------------------------------------|--------------------|---------------------------------|---------------------|-----------------------------|
| <b>Name of the Organisation</b>                                | <b>Designation</b> | <b>Responsibilities Handled</b> | <b>Working From</b> | <b>Monthly Remuneration</b> |
|                                                                |                    |                                 |                     |                             |

| <b>Computer Literacy</b>    |  |                                        |  |  |
|-----------------------------|--|----------------------------------------|--|--|
| <b>Package/ Application</b> |  | <b>Details of Exposure/Proficiency</b> |  |  |
|                             |  |                                        |  |  |
|                             |  |                                        |  |  |

| <b>Language Proficiency</b> |                            |             |             |                        |             |             |                         |             |             |
|-----------------------------|----------------------------|-------------|-------------|------------------------|-------------|-------------|-------------------------|-------------|-------------|
| <b>Language</b>             | <b>Ability to Converse</b> |             |             | <b>Ability to Read</b> |             |             | <b>Ability to Write</b> |             |             |
|                             | <b>Poor</b>                | <b>Fair</b> | <b>Good</b> | <b>Poor</b>            | <b>Fair</b> | <b>Good</b> | <b>Poor</b>             | <b>Fair</b> | <b>Good</b> |
| <b>English</b>              |                            |             |             |                        |             |             |                         |             |             |
| <b>Tamil</b>                |                            |             |             |                        |             |             |                         |             |             |
| <b>Other (Specify)</b>      |                            |             |             |                        |             |             |                         |             |             |
| <b>References:</b>          |                            |             |             |                        |             |             |                         |             |             |

**Declaration:**

I hereby declare that the foregoing information is correct, genuine and complete to the best of my knowledge and belief and nothing has been concealed or distorted.

Place:

Date:

**Signature of Applicant**

