Email the application to careers@fcriindia.com OR by Post to Head -

Application Form: 2024-2025

CONFIDENTIAL



FLUID CONTROL RESEARCH INSTITUTE

(An Autonomous R&D Institute under Ministry of Heavy Industries, Govt. of India) Kanjikode West, Palakkad -678 623, Kerala, INDIA.

Phone No: +91-491-2566120, 2566206; Fax: +91-491-2566326; www.fcriindia.com

P&A a	t above address.	Passport Size	
<u>APPLI</u>	CATION FOR CONTRACT OPENING	Photograph	
	r (Short term Engagement)	•	Thotograph
Diffe	(Short term Engagement)		(Paste JPG format
Notific	ation No. / Date:		photo of size less
	·		than 120kB)
CIOSITIE	g Date for Applications:		
d d	m m y y y y		
C /N1	Г	1	<u> </u>
S/N	Name of andidate in full		
1	Name of candidate in full (as per Class X Certificate)		
2	Present Address		
2	Fresent Address		
3	Permanent Address		
4	Contact Email ID		
5	a) Contact Phone number / mobile		
	number		
	b) Whatsapp number		
6	Sex	Male / Female / Others	
7	Date of Birth and Age (Years)	DD/MM/YYYY	Years
8	Marital Status	Married / Unmarried	
9	State of Domicile		
10	Nationality	INDIAN / Others (please m	nention)
11	Religion		
12	Whether OBC?	YES / NO	
		OBC-Non-Creamy Layer / 0	OBC-Creamy Layer
13	Do you belong to /Scheduled Caste /	YES / NO	
	Scheduled Tribe?		
	If YES, state whether SC / ST	SC / ST	
14	Languages known	1. READ	

2. WRITE

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		3. SPEAK
15	Have you been trained under Apprenticeship earlier or undergoing Apprenticeship training?	
16	Professional Training attended (Name of programme, Duration, Date of completion)	
17	Do you have proficiency in Computer? If so, details of training attended: (Name of programme, Duration, Date of completion)	YES / NO
18	Details of Driving Licence a) Licence No. b) Date of Validity (upto)	
19	Whether Licence to Drive: a) LMV b) LCV c) Heavy Vehicles d) Crane	
20	Years of Driving Experience for LMV	Years
21	Is this your first Job after Education?	YES / NO
22	Whether there are any criminal cases pending against you? If YES, please provide Case details.	YES / NO

23. Academic Qualifications: List in the chronological order (Class X onwards)

SI. No.	Qualification [Course & Specialisation]	Institution/ College & University	Per	iod	Percentage / CGPA
			From	То	
1					
2					
3					

24. Details of Apprenticeships / Trainings completed

Sl. No	Organisation	DATE	DATE	Department	Details about
		From	То		Apprenticeship
1					
2					



J							
25. Give	two references (not	t related t	to you) wh	no are w	ell acquainted with	your background,	
career, cl	haracter, etc.						_
Name		Designa	ition	Off	icial Address	Email ID & Mobile	
						number	
							i

26. Time required to join duty if selected: Dat	e:
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1						
	1000	1000	3.7	5.7	5.7	3.7
			V	V	V	V

27. DETAILS OF YOUR FAMILY MEMBERS:

Member	Name	Nationality (by birth and /or by	Place of birth	Occupation (if employed, give Official address)	Permanent Address
		domicile)			
Father					
Mother					
Spouse					
Brother / Sisters					

28. Your achievements like outstanding contributions in your previous employment, sports, cultural, literature, associations, etc.

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29	Check List:	[Documents to	he attached	with Application	Form to be	sent by Emaill
Z J.	CHECK LIST.	Documents to	ne attached	WILLI ADDIICALIOLI	יו טווווי נט טק	z senil by Linain

- a) This Application Form fully Filled up, Passport size photograph pasted and finally signed. Take a printout and scan to PDF format File. Send the PDF format File by Email.
- b) Scanned Copy (single PDF File) of Experience Certificates as proof for experience as per Notification
- c) Scanned Copy of Certificate(s) regarding Qualifications (single PDF File) and Consolidated Marks Card in Qualifying degree.

	Document to be uploaded	Submitted	Filename
Α	10 th standard marksheet	YES /NO	
В	Copy of valid Driving License	YES /NO	
С	Aadhaar Card	YES /NO	
D	Experience Certificates	YES / NO	
Е	Medical Fitness Document	YES / NO	
F	Any Other document	YES / NO	

Declaration

I hereby certify that the particulars furnished in this Application are true, correct and complete in all respects. I agree and accept without reservation that if at any time, if any of the particulars provided by me is found to be untrue, incorrect and/or incomplete, my engagement at the institute will be terminated without notice.

I also understand that this application or engagement does not provide me any privilege or preferential rights for future employment at FCRI. That this Application is NOT for a Regular Post for present or future opening(s).

I also declare that I will not engage in any political activities or anti-Institute activities within or outside the Institute premises during the period of engagement.

Place:	Signature of Applicant
Date:	