

Affix your recent Passport Size Photograph

CV Format

File No.:WAP/5/851/2024/HR									
Post: Engineer (Civil) on regular of	cadre basis.								
1. Name of Candidate (as rec	orded in Matric	ulation or ea	uivalent certi	ficate)					
2. Father's Name (as recorded	in Matriculatio	n or equivale	ent certificate)					
2. Tutter 5 Tutte (us recorded		li or equivare							
3. Mother's Name (as recorded	d in Matriculation	on or equival	ent certificate	e)					
4. Sex		5. R	eligion						
Male Fema	le		<u> </u>						
6. Marital Status (If married na	ime of spouse)		(Spouse Na	me & National	lity)				
Married Unmarried			(Spouse 1 tal	ine & Ivational	nty)				
7 a) Data of Dinth	h) Dinth Dla	aa/Diatmiat) Dinth Ctata/I	TT				
7. a). Date of Birth D D M M Y Y Y Y	b). Birth Place	ze/District). Birth State/U	J I				
1) NY (' 1')		`	M d T						
d). Nationality		e). Mother Tongue							
f). Age as on date (31/12/2024)	: Year	Months Days							
8. a). Domicile b). Blood gr	oup	c). Identification Marks							
9. Whether belongs to:			1						
SC ST OBC OBC (NCL)	Minority	P.H (%)	(PwBD)	EWS	General				
23 23 33 3 3 3 3		(/-/	(– –)						
10. Languages Known:									
Language	Read	Write	Write		Speak				

11.	Academic/Professional	Oualifications

Sr. No.	Name of Examination		Year of		Univ/Board		Subjects	Mark		% of marks/CGPA	
110.	Examination		Passing				 	Ootai	obtained	Illarks/CGPA	
2.]	Highest anal	ification	acquir	ed in l	Hindi:						
			-								
3.	Training reco	eived if a	any:								
4. E	xperience as	on 31/1	2/2024	(Pleas	se give	details t	hereof, use sep	arate she	et if r	equired)	
<u></u>	mization		Domi	- d		Dagian	ation Pr	Cas	la of	Day/ Crass	
orga	nization		Period			Designation & Description of Duties			Scale of Pay/ Gross Salary		
		Fro	m	[Го	Descii	phon of Dunes	Sai	Salary		
Cotal	Exp										
Otai	ЕЛР										
5. (Corresponde	nce Add	ress:								
	•										
						P	IN	Ph	one		
6. l	Permanent A	ddress:									
						т	DINI	Di	homo		
7	PAN:					Г	PIN	Г	none.		
	Aadhar No.: Guardian/Er		. Conto	ot No							
	Guardian/Er Contact Mol										
	Contact Mol Email ID:)116 1NO/ V	rv 11atSaJ	ρh 1 4 0	••						
	eman id: Passport No										
						Dat	ed I	Drawn ir	ı fav	or of WAPCO	
							rawn in				
	Liiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	. 45. 4111	. IIIIOuli	01 10		u				Duille.	
						or					

Information must be filled against each column clearly. In case incomplete application, the same will not be considered.

(Attach original demand draft/online payment receipt).

24. Any Other information.

I solemnly declare that the above information is true and correct. I understand that in the event of above information found incorrect after my appointment, I shall be liable to be dismissed from service.

Signature Date