

## RAMAGUNDAM FERTILIZERS AND CHEMICALS LIMITED Corporate Office: 4<sup>th</sup> Floor, Wing - A, Kribhco Bhawan, Sector - 1, Noida - 201301 (U.P), Phone: +91-120-2553643, 2553618

(Application form for the post of Company Secretary: Advt. No. Rectt/06/2024)

	Chief Manager (E-6)		Senio	r Manager (E-5)		Both				
P	Post applied for (Please tick) the appropriate option									
1.	Name in full (In Block l	etters)	:		_					
2.	Father's Name		:							
3.	Mother's Name		:				lease affix self ssport size ph			
4.	Nationality		:							
5.	State Domicile		:							
6.	Date of Birth ( <i>DD/MM/</i> Age as on Cut-off Date	/YYYY)	:		_					
7.	Gender (Male/Female/	Others)	:		_					
8.	Marital Status (Married / Unmarried , Widower / Divorced)	/ Widow/								
9.	Present Address for Co	mmunica	ition :							
10.	Permanent Address		÷							
	Nearest Railway Statio :									
12.	Contact No.	:								

	E-mail ID	:
	Alternative E-mail ID (if any)	:
13.	Category (UR /SC/ ST/OBC(NCL)/ EV	S)
14.	Are You a person with Disa (If yes please enclose PwD o	lity (PwD candidate) : Yes / No rtificate)
15.	Domicile of J&K (during 01.	1.1980 to 31.12.1989): Yes / No
16.	Whether Ex-Serviceman/d (If yes please enclose certifi	pendent of those killed or disabled in action: Yes / No ate)
17.	Are you an employee of RF0	? Yes / No
	If Yes, please mention your	mployee No.:
18.		yours is a regular employee of RFCL or part-time/Full time Director ease provide following details):
	Name:	Employee No.:
	Designation:	Relationship:
	-	alification (attach self-attested copies of Marksheets & Degree tion form in support of educational qualifications. Relevant

19 original certificates will have to be produced at the time of verification prior to interview):

Qualification (as per degree/certificate issued by institution/ University)	Period [From- To] (MM/YY)	Name of the Institute/University	Max. marks	Marks obtained	% of marks

			t Experience details ification prior to in	•	original	certificates	will h	ave to
Nam	e of Present O	rganization						
Nature	of Employme	nt: Please se	lect the appropriate	option				
(Ce Gov	ntral/State), A	Autonomous dertakings h	ernment (Central/S s, Statutory Bodies aving Pay Scales r Employment	or Joint Vo	entures o	of State/Cen	tral	
i)	Are you prese pay scale or hi		in E-6 (Rs. 90,000- 2	2,40,000) /	E-5 (Rs. 8	0,000- 2,20,0	000)	
ii)		•	s. 80,000- 2,20,000) mmediately precedin			. , ,	cale	
iii)	Are you prese	ently working	on Fixed Term Emp	loyment ba	sis?			
Note:	Candidates a		o refer "Annexure Pay Scales.	-A" of Deta	ailed Adv	vertisement	for	
b) Candidates working in Private Sectors or any such Government (Central/State), Public Sector Undertakings (Central/State), Autonomous, Statutory Bodies or Joint Ventures of State/Central Government/Undertakings whose Pay Scales do not match with RFCL's given Pay Scales								
i) <i>A</i>	are you present	tly working o	n regular basis?					
ii) A	are you present	tly working o	n Fixed Term Emplo	yment basis	s?			
Lin	ited (NFL), E	Engineers In	or its promoter odia Limited (EIL) asis through empar	& Fertilize	er Corpo	ration of In		
_	cify Post Quali	ification Rel	evant Experience a	s per adve	rtisemer	ıt (Total Exp	oerier	ice from
Name &	Designati		Type of Organization		PERIO	D		detail of
address	of	(CDA/	(Central/State Govt.	From	To	Total		nandled
the Employe	r	IDA) or CTC	/CPSE/ SPSE/ Public Limited Company)	DD/MM/YY	D/MM/YY	Duration upto cut-off date (in		h separate if necessary)
						Yrs. Months & days)		

Name &	Designation	Pay Scale	Type of O	Organization		PERIO	D	Brief detail of
address of		(CDA/		State Gove	. From	То	Total	workhandled
the		IDA) or		PSE/ Public	DD/MM/YY	D/MM/YY	Duration upto	(Attach separate
Employer		CTC	Limited	Company)				sheet if necessary)
							Yrs. Months &	
							days)	
		1161						, ,
My total lengt	th of post qua	ilification	ı work e	xperience	1s ye	ears	months_	days and
my current pa	av scale / CT	C is				_		
, ош голо р	,	<u> </u>						
22. Addition	ial Informat	ion						
(i) If s	elected specif	fy the min	imum re	quired joir	iing time (in	days):		
(ii) Ext	ra – Curricula	ar activitie	es:					
(iii) Kno	owledge of la	nguages						
	C							
Mo	ther Tongue:							
Langua	უ <u></u>	Can	Speak	(	an Write		Can Read	
Zangaa	50	Guii	opean		aii ***1100		Gail Road	
(1.) ****	. 1	1. /			1 10 76			
(iv) Whether any penalty/ punishment was awarded? If yes, give details:								
(v) Wh	ether any civ	il or crimi	inal actio	n or inqui	y is going o	n against t	he applicant	as far as his/
	knowledge g				- <del>-</del>			•

23.	Application Fee Details	
	Mode of Payment	DD / Online Transfer (NEFT/RTGS)
	Payment Reference No (DD No. / Transaction No.)	
	Payment Date: (DD Date / Transaction Date)	
		oof in case of Online Transfer through NEFT/RTGS  Applied for, Advertisement No. and DOB on backside of DD, in  h DD
24. List	of Enclosures:	
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		

## **Declaration**

I hereby declare that all statements as mentioned in this application are true and correct to the best of my knowledge and belief. I understand that in the event of any particulars or information given above being found false or incorrect, or if at any stage it is found that I do not possess the prescribed qualification/experience for the post, my candidature will be rejected ab-initio. If any shortcoming(s) is/are detected even after appointment, my services may be terminated.

Undertaking: I have gone through the detailed advertisement including the qualifying requirements, eligibility conditions, General Conditions and Instructions etc., mentioned therein and fulfill all the eligibility criteria conditions / requirements specified therein. I undertake to produce the original certificates and testimonials as and when required by the management.

## I hereby Accept and confirm the Undertaking.

Signature of the Candidate:	
Name of the Candidate:	Date: