



HIL (INDIA) LIMITED
(A Govt. of India Enterprise)
P.O RASAYANI, Dist. RAIGAD, (MAHARASHTRA)
Ph : 02192 – 250393 –94

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APPLICATION FORM FOR ‘ON THE JOB TRAINING’

Discipline / Trade :-----

1. Name in full (IN BLOCK LETTERS) :
2. Date of birth & age :
(Proof to be attached)
3. Place of Birth :
4. Nationality :
5. Father’s/Husband’s Name :
6. Address for correspondence :
(mention contact Tel. No. if any)
7. Permanent Address :
8. Whether the applicant belongs to SC/ST/
OBC/Ex-Servicemen/PWD (YES/NO). :
IF YES, please write category to which you belong and attach a copy of Certificate in the
prescribed format issued by Competent Authority.
9. Details of Qualifying Examinations :
(Attested Photo copies of all certificates to be enclosed)

Qualification	Discipline/ Subject	Year of Passing	Board/ University/ Institution	Marks obtained	Percenta ge of Marks

DECLARATION :

I hereby certify that the foregoing information is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. In case I have given wrong information, or suppressed any material fact of factual information, then my ‘On the Job training’ is liable to be terminated without giving any notice or reasons thereof. I am also fully aware of the objective of the ‘HIL On the Job Training Scheme’ and that the Trainees engaged under the Scheme shall have no right to be absorbed or appointed against any vacancy in existence or that may arise in future in HIL on successful completion of the training.

Signature of candidate

Place : -----

Date : -----