

(A CSR Initiative led by ONGC)



Up-skilling Program Application Form

(Please Fill the Information as per Aadhar Card Only)

Course Nam	ne (Pls Tick (🗤	/)):								
LPG Delivery P	ersonnel		LPG Mechanic	Retail Outlet A	etail Outlet Attendant (Oil & Gas)					
Vegetable Gro			Dairy Farmer- Entrepreneur		on Computer Concepts					
Plastic Recycli	ng Micro-Entrep	preneur	3D Printing Operator	Al- Data Scier	Scientist					
1. Applicar	nt Name :				Photos					
2. Gender	:	Male	Female							
3. Date of E	Birth :		/, Age:	Years						
4. Email ID	:									
5. Marital S	tatus :	•	/Unmarried Married	_						
6. Father's	Name :	Divorc	ced Separated	Not to be Discl	osed					
7. Mother's	Name :									
8. Religion	(Tick) :		t, Others, Hinduis		·					
9. Caste Co	ategory :		, Buddhism, Zoroast ral SC ST [
10. Disability	(Tick) :	Yes	No If "Yes" Pls	Provide Documer	nt Proof					
11. State	:		District:							
12. ID Type ((Tick) :	Aadha	ar Card Other (Ment	lion)						
13. Aadhar	Card No:									
14. Mobile N	lo :									
15. Educatio										
			Descript / Units (excite (Variate Grade/					

SI. No	Name of Qualification/ Program/Certification	Board/ University/ Certifying Authority	Institute Name	Year of Passing	Grade/ %age
1					
2					
3					
4					

Promoted by:









16. Permanent Address:

Address	
State	District
PIN Code	City
Taluka/Tehsil	Constituency
Communication Same as Permanent Address	Yes No (If "No" mention Below)
Com. Address:	

17. Training Status (Pls Tick) :

Fresher_____ Experienced _____

18. Work Experience, if Any :

SI. No	Name of the Organization	Period of Work (Joining Date (J)- Relieving Date (R))	Designation	Monthly Gross Salary Drawn	Remarks if any
1		J: R:			
2		J: R:			
3		J: R:			

19. Alternated Contact Details

	Alternate No.											Parent No											
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20. Students Source of Information (PIs Tick):

GAIL (I) LIMITED

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Tele-caller _/ Trainer _/ Freelancer _/ Social Worker _/ ADS Staff _/ Industries _/ Visitors _/ ITI_/ College _/ School Staff _/ Student Ref._/ Village People _/ Sarapanch _/ Job Mela _/ YouTube _/ Facebook 🗆 / Instagram 🗆 / Linked In 🗆 / WhatsApp 🗆 / SMS 🗆 / Website 🗆 / Others 🗆 ______

l	\$/0 or D/0	declare
that all information prov	vided in this application is true to the best of my	knowledge and I shall be held
responsible and liable for	or any penal action for any wrong information fou	und in this application form.

Date: / Signa	iture:	I Left Thumb Impression
	(For Office Use Only)]
	Enrolment Details	
Course Name:	Duration:	Months
Date of Enrolment://	, Batch Starts From://	, Batch Ends on://
Documents Submitted By Candidate	<u>e (Please Check & Tick):</u>	
Photographs Election ID Aa Education Proof: Below 5 th 5 th & 7		
Remarks (if any):		1
Date ://		Authorized Signatory with Seal
Promoted by:		Page 2 of 2
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