



MEGHALAYA BASIN DEVELOPMENT AUTHORITY (MBDA)

Headquarter, Nongrim Hills, Shillong

Meghalaya- 793003

Phone: +91-364- 2522921/2522992

Website: www.mbda.gov.in, E-mail: admin.mbda@gov.in

PRESCRIBED APPLICATION FORM

1. a) Advertisement No. & Date : _____
- b) Name of the post being applied for : _____
- c) Preferred Location : _____

2. Personal Details:

- a) Full name of the candidate (in block letters) : _____
- b) Date of Birth (DD/MM/YYYY): _____ and Age as on **01.01.2022** : _____
- c) Gender (Male/Female) : _____
- d) Marital Status : _____

3. Pre-requisite qualifications for the post (*starting from the highest degree obtained*):

| Examination Passed | Duration of the course | | Name of the College / University | Grade / Division | % of marks obtained |
|--------------------|------------------------|-----|----------------------------------|------------------|---------------------|
| | From: | To: | | | |
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4. Any other qualification (*diploma course, training attended, computer course, etc.*):

| Name of the Course/Training | Name of the institution | Duration of the course | | Grade/Division |
|-----------------------------|-------------------------|------------------------|-----|----------------|
| | | From: | To: | |
| | | | | |
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5. Employment Record (starting from the current employment):

| Name of the Employer/ Organisation | Duration/Period of Employment | | Designation | Nature of work | Salary | Reason for leaving |
|---------------------------------------|-------------------------------|-----|-------------|----------------|--------|--------------------|
| | From: | To: | | | | |
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a) Total years of experience : _____

b) Relevant years of experience for the position applied : _____

6. Any other relevant information for the post being applied:

7. Language Proficiency:

a) Read : _____

b) Write : _____

c) Speak : _____

8. Permanent Address :

9. Address for Communication:

10. Contact details:

i. E-mail ID : _____

ii. Mobile : _____

iii. Telephone Number : _____

11. All supporting documents should be enclosed for **Sl. No. 2, 3, 4&5** mentioned above.

12. Professional References:

(List names and complete contact information of two persons of which one should be a direct supervisor and the other one should have good knowledge about your work.)

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Declaration:

I hereby declare that the information furnished above is true to the best of my knowledge. I understand that if any information is found to be false / misleading, I may be liable to be disqualified from the recruitment process.

Dated :

Place :

(Signature of the Candidate)