

MEGHALAYA BASIN MANAGEMENT AGENCY (MBMA)

Regd. Address: House No. L/ A-56 Lower Nongrim Hills,

Shillong, East Khasi Hills, Meghalaya- 793003 (CIN No. U75144ML2012NPL008509) Phone: +91-364- 2522921/2522992

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

PRESCRIBED APPLICATION FORM									
1.	a)	Advertisement No. &	_ Paste recent						
	b) Name of the post being applied for :						passport size photograph		
	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 10.07.2020 :								
	c) Gender (Male/Female) :								
	d)	Marital Status			·				
3.	3. Pre-requisite qualifications for the post (starting from the highest degree obtained):								
	Exa	amination Passed	Duration of the course		Name of the College /	Grade /	% of marks		
			From:	To:	University	Division	obtained		

4. Any other qualification (*diploma course, training attended, computer course, etc.*):

Name of the	Name of the institution	Duration of the course		
Course/Training		From:	To:	Grade/Division

Duration/Period of Name of the Reason for **Employment** Employer/ Designation Nature of work Salary leaving From: To: Organisation a) Total years of experience attained as on 12.06.2020 b) Relevant years of experience as on 12.06.2020 Any other relevant information for the post being applied: 7. Language Proficiency: a) Read b) Write c) Speak 8. Permanent Address: Address for Communication:

5. Employment Record (*starting from the current employment*):

	i.	E-mail ID		
	ii.	Mobile	:	
	iii.	Telephone Number	:	
11. All s	supporti	ng documents should be	enclosed for Sl. No. 2, 3, 4 & 5 m	nentioned above.
(List	t names	l References: and complete contact in ould have good knowledg		ich one should be a direct supervisor and th
Declara	ation:			
I her	reby dec	clare that the information	n furnished above is true to the b	est of my knowledge. I understand that if an
informa	ation is f	found to be false / misle	ading, I may be liable to be disqua	alified from the recruitment process.
Dated	:			
Place				(Signature of the Candidate)

10. Contact details: