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APPLICATION FOR THE POST OF – ACCOUNTS ASSISTANT

Name							
Father's Name							
Mother's Name							
DOB & Age		DOB:			Age:		
Address for Communication							
Permanent Address							
Land Line / Mobile No.							
Email ID							
Pan Card No.							
Adhaar Card No.							
Qualification	Trade/ Branch	Board/ University	Name of the Institute	Year of Passing	Max Marks	Marks obtained	% of Marks
SSLC	--						
PUC							
B.Com							
1st Semester							
2nd Semester							
3rd Semester							
4th Semester							
5th Semester							
6th Semester							

Work Experience in Chronological order:

Sl. No.	Name of the Organization with address	Designation	Date		Salary PM. Rs.	Remarks
			From	To		

Soft skills:

Documents enclosed:

Sl. No.	Description	Enclosed copy		Remarks
		Yes	No	
01	SSLC Marks card			
02	PUC Marks Card			
03	B. Com Marks Card [All Years/Semesters]			
04	B.Com Graduation / Post Certificate			
05	Experience Certificate/s			
06	Study Certificates of respective courses			
07	Character Certificate			
08	Pan Card			
09	Adhaar Card			
10	Voter ID			
11	Any other documents			

[Enclose all necessary documents duly self attested)

I hereby declare that, the information filled in the application is correct to my knowledge and I will abide to all the Rules & Regulations of GTTC. I also accept to work in any of the GTTC Centers.

Place:
Candidate.

Date:

Signature of the