# GOA SHIPYARD LIMITED

## PERSONAL DATA FORM FOR EXECUTIVES

Affix Photo

**ADVT. NO.** _____ **POST:** _____

NAME: _____

CATEGORY: _____ JOB REG. NO. _____

DATE OF BIRTH: _____ PRESENT AGE: _____

TRAVELLED FROM: _____

QUALIFICATION:

| Sr. No. | Name of the Examination Passed | Year of Passing | Specialization | Marks | | Division |
|---|---|---|---|---|---|---|
| | | | | Obtained | Out of | |
| | | | | | | |
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EXPERIENCE & JOB HANDLED:

| Sr. No. | Name of the Company | Designation | Period | | Nature of Responsibilities |
|---|---|---|---|---|---|
| | | | From | To | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Turnover of Company (Last 02 years worked):- _____

ADDRESS:- _____

_____

Email ID: _____ Contact No:- _____

Date:- _____ Signature of Candidate:- _____