



# Goa State Infrastructure Development Corp. Ltd

## STAFF APPLICATION

Please affix  
your recent  
Photograph  
here.

**Applicant's Name:** \_\_\_\_\_

**Position Applied for: Municipal Finance Expert/ State  
Mission Manager- Finance &  
Strategy**

**Full Name in Block Letters:**

Mr. / Ms.

(FIRST NAME)

(MIDDLE NAME)

(SURNAME)

**Present Address****Permanent Address****Telephone No. (Residence):****(Mobile):****Email Id:**

| Date of Birth | Age | Place of Birth | Nationality | Marital Status | Sex |
|---------------|-----|----------------|-------------|----------------|-----|
|               |     |                |             |                |     |

| Height | Weight | No of years Residing in Goa | Employment Exchange No. |
|--------|--------|-----------------------------|-------------------------|
|        |        |                             |                         |

**Family Details**

| Relation | Name | Age | Education | Employment |
|----------|------|-----|-----------|------------|
| Father   |      |     |           |            |
| Mother   |      |     |           |            |
| Spouse   |      |     |           |            |
| Children |      |     |           |            |
| Siblings |      |     |           |            |

| Language known | Can Speak<br>(Please tick) | Can Read<br>(Please tick) | Can Write<br>(Please tick) |
|----------------|----------------------------|---------------------------|----------------------------|
|                |                            |                           |                            |
|                |                            |                           |                            |
|                |                            |                           |                            |
|                |                            |                           |                            |

| <b>Education</b>        |  |                |    |                                       |                            |                                    |
|-------------------------|--|----------------|----|---------------------------------------|----------------------------|------------------------------------|
| Name of examination     | School / College / University/ Institution | Year (mm/yyyy) |    | Examination passed and major subjects | Div/Class with % of marks) | Ranks/Medals or other achievements |
|                         |  | From           | To |                                       |                            |                                    |
| X Std                   |  |                |    |                                       |                            |                                    |
| XII Std                 |  |                |    |                                       |                            |                                    |
| <b>B.E/ Diploma</b>     |  |                |    |                                       |                            |                                    |
| Year/Semester           |  |                |    |                                       |                            |                                    |
|                         |  |                |    |                                       |                            |                                    |
| Year/Semester           |  |                |    |                                       |                            |                                    |
|                         |  |                |    |                                       |                            |                                    |
| Year/Semester           |  |                |    |                                       |                            |                                    |
|                         |  |                |    |                                       |                            |                                    |
| Year/Semester           |  |                |    |                                       |                            |                                    |
|                         |  |                |    |                                       |                            |                                    |
| <b>Post -Graduation</b> |  |                |    |                                       |                            |                                    |
| Year/Semester           |  |                |    |                                       |                            |                                    |
|                         |  |                |    |                                       |                            |                                    |
| Year/Semester           |  |                |    |                                       |                            |                                    |
|                         |  |                |    |                                       |                            |                                    |
| <b>Others</b>           |  |                |    |                                       |                            |                                    |

| <b>Computer Certificate Course</b> |                         |                     |                            |
|------------------------------------|-------------------------|---------------------|----------------------------|
| Name of Course                     | Month & Year of Passing | Name of Institution | Principle Subjects Studied |
| Certificate Course                 |                         |                     |                            |
| Post Graduate Diploma              |                         |                     |                            |

**Training (Specialized / Technical/Behavioral Training Undergone) :**

| Name & address of training Institution / Employer | Particulars of Training | Period of Training |    | Certificate obtained |
|---|-------------------------|--------------------|----|----------------------|
|   |                         | From               | To |                      |
|   |                         |                    |    |                      |

**Work Experience(In Chronological Order):**

May attach a Resume

| Name & address of Employer | Last position held & main responsibilities | Date of Joining | Date of Leaving | Reason for leaving | State clearly last salary & perquisites |
|----------------------------|--|-----------------|-----------------|--------------------|---|
|                            |  |                 |                 |                    |   |

**Significant Achievements:**

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|--|
|  |
|--|

**Any Other Information:**

Any additional information about yourself which you feel will be helpful to us in considering application for employment with us :

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|--|--|
| <b>If Selected when you can join GSIDC</b> |  |
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I hereby certify that all the information provided above is true and correct to the best of my knowledge. Any false or misleading information provided on this form or any other document may result in the employment being terminated.

Place:

Date:

Signature:

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