

BROADCAST ENGINEERING CONSULTANTS INDIA LIMITED

(A Government of India Enterprise under Ministry of Information & Broadcasting)
(A Mini Ratna Company)

Head Office: 14-B, Ring Road, I.P. Estate, New Delhi-110002, Phone: 011-23378823 **Corporate Office:** BECIL Bhawan, C-56/A-17, Sector-62, Noida-201307 **Phone:** 0120-4177850 / 4177860 **Fax:** 0120-4177879 **Website:** www.becil.com

VACANCY NOTICE - 198

BECIL invites interested candidates to attend interaction via video conferencing for below mentioned post in Delhi State Civil Supplies Corporation Limited (DSCSC), Govt. of NCT. Details are given below:

| Sr. No. | Post Name | No. of Post | Qualification | Age |
|------------|-------------------|----------------|---|---|
| 1 | Asstt. Grade-I | 16 | Intermediate from a recognized university/board or its equivalent and should have a typing speed @ 30 words per minute in English or @ 25 words per minute in Hindi on computer (35 words per minute and 30 words per minute correspond to 10500 KDPH/9000KDPH on an average of 5 key depression for each word) | Min. Age Limit- 18 years Max Age Limit- 27 Years |
| 2 | MTS | 54 | 10 th pass from recognized board | Min. Age Limit- 18 years |

- 1. Selection will be made via video conferencing interaction and as per requirement of the job. Candidates are requested to check their mail lds only for any further communication.
- 2. No TA/DA will be paid for attending the interaction/interview/ joining the duty on selection.
- 3. Mode of Application is ONLINE. Candidates are requested to fill the Registration Form (copy enclosed) and send the scan copy of registration form to Mail ID: DSCSC2022@gmail.com latest by 28.09.2022 till 12 PM (Mid- Night). It is required to attach scan copies of below mentioned documents:
 - a) 10th/ 12th Mark sheet/ Graduation (if any)
 - b) Work Experience Certificates
 - c) PAN Card, Aadhar Card
 - d) Copy of EPF/ESIC Card (if already have)
 - e) Police Verification (at the time of joining)

In case of any doubt/help please contact: 99901 01109/81301 90460

4. Candidates are required to furnish correct details of Mail ID and Mobile No. for interaction via Video Conferencing.

Dared: 24.09.2022

| For office Use: Reg. No. Dated: Fee: | |
|--------------------------------------|--|
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(A Govt. of India Enterprise)

Head Office: 14-B, Ring Road, I.P. Estate, New Delhi-110002

Tel: + 91(11) 23378823-25, Fax No. + 91(11) 23379885

Corporate Office: BECIL Bhawan, C-56, A/17, Sector-62, Noida – 201307 Uttar Pradesh Tel: 0120-4177850 Fax: 0120-4177879

E_Mail: contactus@becil.com

Website: www.becil.com

Please attach recent passport size photograph

(REGISTRATION FORM)

(PLEASE FILL THIS FORM IN CAPITAL LETTERS ONLY)
Important: Please read the advertisement carefully before filling this form)

| 1. Application for the post of: | | | | | | |
|---|--|--|--|--|--|--|
| | | | | | | |
| 2. Name - Mr. / Mrs. / Miss. (Please tick the appropriate | | | | | | |
| First Name Middle Name | Last Name | | | | | |
| Father's Name: | | | | | | |
| | | | | | | |
| 4. Date of Birth: Day Month Year | | | | | | |
| 5. Universal Account Number (UAN) or Previous PF M | ember ID (if any): | | | | | |
| UAN No. | | | | | | |
| C | DR . | | | | | |
| Previous PF Region Code Office Code Member ID | Establishment ID Extension Account No. | | | | | |
| 6. Employee State Insurance No. (if any) | | | | | | |
| 7. PAN No. (compulsory) | | | | | | |
| 8. Aadhar No. (compulsory) | | | | | | |
| 9. Category: General OBC SC | ST PH Other | | | | | |
| 10. Marital Status: Married Unmarried | | | | | | |
| 11. Nationality : | 12. Religion: | | | | | |
| 13. Contact Details: | | | | | | |
| PERMANENT ADDRESS | PRESENT ADDRESS | | | | | |
| HOUSE NO. | HOUSE NO. | | | | | |
| | | | | | | |
| | | | | | | |
| CITY: | CITY: | | | | | |
| STATE: | STATE: | | | | | |
| PIN: | PIN: | | | | | |
| MOBILE: | MOBILE: | | | | | |
| EMAIL: | EMAIL: | | | | | |

| 15 | Education | onal/Profe | lsnoi229 | Qualifica | ations |
|----|-----------|------------|----------|-----------|--------|
| | | | | | |

| 13. | Educational/Fio | iessionai Quanncai | iolis. | | | | | |
|------------------|---|---|-------------------|---------------------------|----------------|----------------|-------------------|------------|
| S. No. | Qualification | alification Details of C | | Course Board / University | | | Year of Passing | Percentage |
| 1 | X (10) | | | | | | | |
| 2 | XII (10+2) | | | | | | | |
| 3 | Graduation | | | | | | | |
| 4 | Post-Graduation | | | | | | | |
| 5 | Diploma | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 16. | Work Experience | e (add separate she | et if required |): | | | l . | |
| | | o (ada coparato circ | | ,. | | | | |
| S. No | | anization | Designat | ion | on Duration To | | Brief Job profile | |
| 1. | | | | | 110 | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| 4. | | | | | | | | |
| | | | | | | | | |
| 17. ⁻ | Total number of | years of experience |) : | | | _ | | |
| 18. | References | | | | | | | |
| S.I | No. | Name | Address | | | Contact Number | | |
| | | | | | | | | |
| | | | | | | | | |
| 19. | If selected your | preferences for loca | ation | | | | | |
| | 1 | 2 | 3 | | 4 | 1. Anywhere | in India Yes | No |
| 20. | Languages knov | vn (Tick appropriate | e boxes) | | | | | |
| | | Read | Speak | | Write | | | |
| | 1 | - <u> </u> | | | | | | |
| | 2 | - ⊔ | | | Ш | | | |
| | 3 | - 🗆 | | | | | | |
| Note | f) Educationa g) Birth Certif h) Caste Cert i) Work Expe j) PAN Card k) Aadhar Ca l) Copy of EF | ificate, if any. rience Certificates | ficates ady have) | owing | documents v | with the form | : | |

Signature _____ Date ___