



RAJASTHAN STATE WAREHOUSING CORPORATION
(A Government Undertaking)
Head Office, Bhawani Singh Road, Jaipur

(Last date for receipt of the application 30.06.2009)
(Format of Application)

No. -----
(For Office use)

Application for the post of Warehouse Manager in the Rajasthan State Warehousing Corporation

Name of the Post applied : Warehouse Manager

**Managing Director,
Rajasthan State Warehousing Corporation
Head Office,
Bhawani Singh Road,
Jaipur (Rajasthan) 302 015**

1- Full Name (a) In English :
(Capital Letters)

(b) In Hindi :

2- Category :
SC/ST/OBC/General/
Handicapped(Blindness/
Low Vision

3- Father's/Husband's Name :

4- Complete address for :
Correspondence
(with Pincode)

5- Permanent Address :

Telephone : Resi. Mobile



- 6- Date of Birth(In words & Figures) :
- 7- Age :Year.....Month.....Day
- 8- Place of Birth :
- 9- Gender (Female/Male) :
- 10 Marital status :
- (Married/Unmarried/Widow/Divorced)
- 11 If married, number of living children :
- (Prior and after to 01.06.2002)
- 12 Does the candidate belong to :
- SC/ST/OBC of Rajasthan State (If Yes,
details with certificate)
- 13 Does the candidate belong to bonafide :
- resident of TSP area (If Yes, details with
certificate)
- 14 Does the candidate belong to the :
- category of handicapped (If Yes, details
with certificate)
- 15 Registration No. of Planning Manpower :
- Department (if any)
- 16 Particulars of the Educational :
Qualification

S. No.	Name of Examination	Name of Board/ University	Name of School/ College/ Institution	Year	Marks Obtained	Max. Marks	Percentage (%)
1-	Secondary						
2-	Senior/ Higher Secondary						
3-	Graduate (Agri.)						
4-	Post Graduate (Agri.)						
5-	M.B.A.						
6-	PG Diploma in Management						
7-	Other, if any						

- Note**
- (1) If grading is provided in the graduation/post graduation degree, its formula and total marks obtained and total marks in graduation/post graduation degree may clearly be indicated alongwith percentage marks obtained.
 - (2) Attested copy of marksheets of each year/semester of graduation/post graduation/M.B.A./PG Diploma in Management degree may be enclosed.

17 Other Experience, if any (enclosed work experience certificate issued by competent authority)

S. No.	Name of Employer	Name of Post	Period From _____ to _____	Pay Scale	Total monthly Salary
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18 Demand Draft/Pay Order enclosed : Number
(Name of the issuing bank)

Date

Amount

Date

Place

- Enclosures**
1.
 2.
 3.
 4.
 5.
 6.
 7.
 8.
 9.
 10.
 11.

(Signature of Applicant)
Name -----