

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 ADVERTISEMENT NO. 140 (WALK-IN INTERACTION)

BECIL invites interested Candidates to attend Walk-in Interview/interaction in the office of Chittaranjan National Cancer Institute (CNCI), Kolkata as per details given.

S. No.	Post/ Requirement Qualification		Monthly Remuneration	Date / time / Venue of Interview/interaction	
1	Sr. Nursing Staff (05)	Diploma in Nursing General Nursing Midwifery (GNM) with minimum 10 years of experience in NABH accredited Hospital Should be Registered with Nursing Council Desirable: Preference will be given to B.Sc./M.Sc. degree holder. Age Limit: Up to 45 years	Rs.50,000/-	Date: 07 th June, 2022 Reporting Time: at 10:30 am Venue: Chittaranjan National Cancer Institute (CNCI) Kolkata, Street No.299, DJ Block, Action Area-1, Newtown, Kolkata-700156	
2	Staff Nurse (15)	Diploma in Nursing General Nursing Midwifery (GNM) Should be Registered with Nursing Council Desirable: Preference will be given to B.Sc./M.Sc. degree holder. Fresher may also apply Age Limit: Up to 30 years	Rs.30,000/-	Date: 09 th June, 2022 Reporting Time: at 10:30 am Venue: Chittaranjan National Cancer Institute (CNCI) Kolkata, Street No.299, DJ Block, Action Area-1, Newtown, Kolkata-700156	

- 1. Selection will be made as per the prescribed norms and requirement of the job.
- 2. No TA/DA will be paid for attending the interaction/interview/ joining the duty on selection.
- 3. Preference will be given to those candidates who are already working in the same/similar department.
- 4. Candidates are requested to fill the Registration Form (copy enclosed) and submit the same at the time of interaction/interview along with following documents:
 - a) Educational / Professional Certificates
 - b) Birth Certificate
 - c) Caste Certificate, if any.
 - d) Work Experience Certificates
 - e) PAN Card
 - f) Aadhar Card
 - g) Copy of EPF/ESIC Card (if already have)
 - h) Police Verification (at the time of joining)

In case of any query/help please email at: sanyogita@becil.com OR Call: 0120-4177860

Dated: 11.05.2022

For office Use: Reg. No. Dated: Fee:	
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BROADCAST ENGINEERING CONSULTANTS INDIA LTD



(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 appropriat	'e)				
	First Name	Last Name				
	First Name Middle Name	Last Name				
3.	Father's Name:					
4.	Date of Birth: Day Month	Year				
5.	Universal Account Number (UAN) or Previous PF Mo	ember ID (if any):				
	UAN No.					
	C	PR .				
	Previous PF Region Code Office Code	Establishment ID Extension Account No.				
	Member ID					
6.	Employee State Insurance No. (if any)					
7.	PAN No. (compulsory)					
8.	Aadhar No. (compulsory)					
9.	Category: General OBC SC	ST PH Other				
10.	10. Marital Status: Married Unmarried					
11.	Nationality :	12. Religion:				
13.	Contact Details:					
PEF	RMANENT ADDRESS	PRESENT ADDRESS				
НО	USE NO.	HOUSE NO.				
CIT	Y:	CITY:				
STA	ATE:	STATE:				
PIN	:	PIN:				
МО	BILE :	MOBILE :				
EM	AIL:	EMAIL:				

4 E	Educatio	nal/Drafa	ccional (Qualification	
15	Fallcatio	nal/Prote	รรเกทลเ เ	DUALITICATIO	۱n۹

Signature _

15.	Educational/Pro	fessional Qualifica	ions:					
S. No.	Qualification	Details of 0	Course	Воа	ard / Univers	ity	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 require	ed):				
S. No.	Orga	anization	Designa	ation	Dur From	ration To	Brief Jo	b profile
1.					110111			
2.								
3.								
4.								
17.	Total number of	years of experienc	e:			_		
	References						_	
S.N	lo.	Name			Address		Contac	t Number
19.	If selected your	preferences for loc	ation					
		2				4. Anywhere i	n India Yes	No
20.	Languages know	wn (Tick appropriat Read	e boxes) Speak		Write			
	1	_						
	2	- 						
	3	_						
Note: Please attach self attested photocopies of following documents with the form: i) Educational / Professional Certificates j) Birth Certificate k) Caste Certificate, if any. l) Work Experience Certificates m) PAN Card n) Aadhar Card o) Copy of EPF/ESIC Card (if already have) p) Police Verification (at the time of joining)								

Date ____