PARADIP PORT AUTHORITY ADMINISTRATIVE DEPARTMENT

APPLICATION FOR: TRAINEE PILOT (ON CONTACT BASIS)

Name of the Candidate (in Block :_____

1.

2. Father's/Husband's Name : 3. Date of Birth (dd/mm/yyyy) :	Affix Passport size Photograp
3. Date of Birth (dd/mm/yyyy)	Photograp
4. Age as on 01.12.2025	_
5. Permanent Address :(with pin code)	_
6. Address for correspondence : (with pin code)	_
7. E-mail address, phone numbers : E-mail:	
8. Nationality :	
9. Religion :	
10. Category (SC/ST/OBC/GEN)	
 11. Gender 12. If physically handicapped, sub Category of PH 13. Marital Status 14. Details of Educational & Professional Qualification from Matriculation onward Competency Certificate achieved (Enclose separate sheet, duly signed, if space insufficient) 	
insufficient) (1) (2) (3) (4) (5) (6) (7))
SI. Examination Month / Name of University %age of Marks No. passed Year of passing Institute Marks	y of

15. Details of experience (in chronological order). (Enclose a separate sheet, duly signed, if the space below is insufficient.

(1)	(2)	(3)	(4)	(5)	(6)	(7	')
SI. No.	Name of organization	Name of Vessel	Rank	From date	To date	Net Time	Sea

1 /	betails of computer knowledge	*
18	Whether convicted by any Court of Law?	: (Yes/No) (If Yes, furnish details)
19	Language known (Read, write, speak and understand)	:
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und mis	I hereby solemnly declare and undertake rue, correct and complete to the best of ertake that, if at any stage of selection, the leading, my candidature/appointment/service to the service to the best of the best of the service to th	e that all information furnished by me f my knowledge and belief. I also he information furnished is false or
	e:	Signature:
Plac	ce:	Name :

Note: Self attested copies of documents in support of educational qualification and experience must be enclosed. Application will not be considered without self attested copies of all supporting documents. Applicant must attach two latest passport size photographs mentioning his/her name on the back side.