



# 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, **Fax:** 0120-4177879 **Website:** www.becil.com

## VACANCY ADVERTISEMENT NO. 185

### WALK-IN-INTERACTION

BECIL invites interested candidates to attend Walk-in-Interaction for selection of manpower purely on outsource basis for deployment in AIIMS, New Delhi /Jhajjar.

S. No.	Post	Evaluation Criteria	Requirement (may get increase or decrease as per the requirement)	Monthly Remuneration	Schedule
1	Phlebotomist	Bachelor's Degree in Medical Laboratory Technologists/Medical Laboratory Science (Physics, Chemistry and Biology/Biotechnology) from a Govt. recognized University/Institution.	04	Rs.21,970/-	<p><b>Date:</b> 29<sup>th</sup> August, 2022 (Monday)</p> <p><b>Reporting Time:</b> at 11:00 am</p> <p><b>Venue:</b> All India Institute of Medical Sciences, (AIIMS), Jai Prakash Narayan Apex Trauma Center (JPNATC), Administration Section, New Delhi- 110029</p>

- Selection will be made as per the prescribed norms and requirement of the job.
- No TA/DA will be paid for attending the interaction/interview/ joining the duty on selection.
- Preference will be given to those candidates who are already working in the same/similar department.
- Candidates are requested to fill the Registration Form (copy enclosed) and submit the same at the time of interaction.
- Duly filled in application form along with self-attested photocopies of educational/ experience certificates, two passport size photograph, PAN Card, Aadhar Card and **non-refundable registration fee of Rs.590/- (Rupees Five Hundred Ninety Only) for General/OBC candidates and Rs.295/- (Rupees Two Hundred Ninety Five only) for SC/ST/PH/EWS** is required to be submitted at the time of interaction. Registration fee can be deposited by candidate in the form of demand draft drawn in favor of **BROADCAST ENGINEERING CONSULTANTS INDIA LIMITED** payable at **New Delhi** or in cash personally on receipt of registration slip.

In case of any query/help please email at: [sanyogita@becil.com](mailto:sanyogita@becil.com) OR Call : [0120-4177860](tel:0120-4177860)

Sd/-  
DGM (MR)

For office Use: Reg. No. \_\_\_\_\_ Dated: \_\_\_\_\_ Fee: \_\_\_\_\_



## 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](mailto:contactus@becil.com) Website: [www.becil.com](http://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)

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First Name

Middle Name

Last Name

3. Father's Name:

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4. Date of Birth:   Day   Month    Year

5. Universal Account Number (UAN) or Previous PF Member ID (if any):

UAN No.												
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OR

Previous PF Member ID	Region Code	Office Code	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. Educational/Professional Qualifications:

S. No.	Qualification	Details of 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 (add separate sheet if required):

S. No.	Organization	Designation	Duration		Brief Job profile
			From	To	
1.					
2.					
3.					
4.					

17. Total number of years of experience: \_\_\_\_\_

18. References

S.No.	Name	Address	Contact Number

19. If selected your preferences for location

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. Anywhere in India  Yes  No

20. Languages known (Tick appropriate boxes)

	Read	Speak	Write
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: Please attach self attested photocopies of following documents with the form:

- 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)

Signature \_\_\_\_\_

Date \_\_\_\_\_