



Please affix passport size Photograph (self-attested)

राष्ट्रीय इस्पात निगम लिमिटेड Rashtriya Ispat Nigam Limited (भारत सरकार का उद्दम) (A Govt. of India Enterprise) विशाखपट्टणम इस्पात संयंत्र Visakhapatnam Visakhapatnam

Advertisement No. RINL/CA/CS (Trg)/2024/01

APPLICATION for PRACTICAL TRAINING for COMPANY SECRETARY STUDENTS

(for Training as per the Company Secretaries Regulations, 1982)

[Please print this application and filled-up in BLOCK CAPITAL LETTERS in English conspicuously with neat <u>HANDWRITING</u> of the aspirant]

(A)	PERSONAL DETAILS				
(i)	Name of the Student:				
(ii)	CS Student Registration No. (as allotted by ICSI):				
(iii)	Date of Birth (DD/MM/YYYY):/				
	(As per proof of 10 th /SSC/Academic certificates)				
(iv)	E-mail:	Mobile No.:			
(v)	Aadhar No.:				
(vi)	Address for communication:		•	•	
(vii)	City/Dist: State: Permanent Address (if different from the above):	PIN Code			
	City/Dist: State:				
(viii)	Nationality:Languages known:		Mother Tong	ue:	
(B)	PARENT / GUARDIAN DETAILS:				
(ix) (x)	Name: Occupation:		•		
(C)	EDUCATIONAL QUALIFICATIONS & TRAINING	DETAILS			
(xi)	Particulars of Company Secretary (ICSI) Course Exam	minations passe	d:		
S.l	No. Foundation, Executive & Professional Programmes of ICSI	Group/	Month & Year	Marks Secured	

S.No.	Foundation, Executive & Professional Programmes of ICSI	Group/ Module	Month & Year of Passing	Marks Secured
1.				
2.				
3.				
4.				
5.				
6.				

Ple	ease specify All India (S Rank/Meda	us, if any:-					
(xii)	Particulars of Acade separate sheet for mo	_	·	/ SSC and Plus T	wo/12 th	onward.) at	ttach	
S.No.	Name & Place of th College/ Uni		Course Name	Full Time/ Part Time	1	th & Year Passing	Division Secured	%
1.								
2.								
3.								
4.								
5.								
	Particulars of FULL Name of the Course Name & Place of the I Details of CS Training	nstitution / Col	Duration	: From: (MM/YYYY)	То	O: (MM/YYYY)		
			No. of leaves	Training registe		NOC	Sponsors	hip
Nam	ne of the Trainer(s)	Period of Training	raining taken during			submitted	Letter No	Letter No. &
			the period	(Yes/No)		or not	Date	
	Details of EDP Train me of the Programme		under the new	Mode of Training St Mode of Training (Online/Physical	g		e No. if any	•
	Details of Prior Work ne of the Organisation/ Firm	- ·	if any: (Please attaint) iption & Compu		riod To	Г	Designation	
				110111	10			
	Period of Training so If No, what will be the OTHER DETAILS	period of train	ing sort, specify	······································	nt)			
	Upon selection, no. of Upon selection, willin Visakhapatnam (For n	ngness to reloca	ate and Stay at	the Accommodat	ion prov			
	Please attach Resume/Bi							
(E)	SELF-EVALUATIO	N SHEET (ma	ndatory to fill t	ne self-evaluation	n marks)		

Note: Please mention self-evaluation marks against each criteria in the column (4) in below table as per criteria fulfillment based on the documentary proof(s) attached to the application and mention either '0' or 'Nil' if no marks against any such criteria. Please take note that filling of self-evaluation marks and enclosing of documentary proof(s) as support of such self-evaluation is mandatory and any deviation to this conditions will lead to reject the application without any further intimation/notice/information.

S.No. (1)	Criteria (2)	Max. Marks (3)	Marks (Self- evaluation) (4)
(i)	All India Rank (AIR) secured in Executive, Professional of ICSI. (5marks/Rank)	10	
(ii)	Executive, Professional of ICSI cleared in a single attempt. (5marks/programme)	10	
(iii)	Working experience in relevant domain. *	15	
(iv)	Full time LL.B / M.B.A passed or any other professional course completed.	15	
(v)	Full Time Graduation (3YDC) Degree passed	10	
	Total Marks obtained on self-evaluation basis based on documentary proofs	60	

^{*} Experience in relevant domain viz. Secretarial, Legal, Accountancy etc., with MS-Office Computer proficiency. The experience should be supported by Experience Certificate. The consideration and evaluation of experience certificate is at the sole discretion of RINL/VSP.

DECLARATION

I hereby declare that I agree with all the terms & conditions of the advertisement given for this application and all the information stated in this Application Form and attached Resume/Bio-data are true and I did not willfully suppress any material fact. In case any of my information/ declaration and documents attached herewith are found to be false and if I am unable to produce relevant documents in support of the eligibility condition, my candidature may be cancelled at any stage of the process / internship without any notice and I am liable for the course of action, if any, taken by RINL including recommendation to ICSI for necessary disciplinary action.

Place:	
Date:	Signature:

Please do signature at bottom on each & every page

Duly filled with handwriting and signed & dated scanned application along with signed & dated copy of **RESUME / BIO-DATA** should be sent by email to the email id(s) given in the advertisement on or before the due date. Applications received beyond due date will be rejected without any communication. For any further clarifications Company Affairs Dept, RINL may be contacted at email: csrinl@vizagsteel.com; Phone:0891-2759482 / 2518249 or RK Dasari, Sr. Manager Company Affairs Department, email: rkdasari@vizagsteel.com Mobile:9177205205. Scan copy should be conspicuous and printable for filing.