



COCHIN PORT AUTHORITY W/ISLAND, COCHIN – 682 009, KERALA STATE, INDIA

Ph.No.0484-2582113 Website: www.cochinport.gov.in

NOTICE INVITING APPLICATION FOR ENGAGEMENT OF Electric Supervisor & Technician/ Electrician on Contract Basis for a period of three (3) years IN MECHANICAL ENGINEERING DEPARTMENT

SI. No	Name of Post	Qualification & Experience
	UR – 3, OBC – 1	Degree in Electrical & Electronics Engg. With 1 year Exp. or Diploma in Electrical Engg. With minimum 3 year Exp. in HT Installations/ Substations
2	Contract Basis	ITI in Electrician trade with minimum 2 year Experience in HT / LT Installations/ Substations

The contract will be purely for three year only. The Remuneration specified in the schedule will be as a consolidated pay.

Eligible candidates may send in their application as per the proforma given below (Annexure – I) along with Curriculum vitae and copies of relevant Certificates & Medical Fitness Certificate if applicable, with subject as "Application for the Post of _____" to the Secretary, Cochin Port Authority, Willingdon Island, Cochin, Kerala, Pin-682 009 latest by 26.08.2024, which shall be the crucial date for determining the qualification, experience and age. The applications received after the last date or otherwise incomplete will not be considered.

Cochin Port reserves the right to shortlist the number of candidates for Test / interview out of eligible candidates. The short listing will be based on higher qualification, length and range of experience, accreditations, certifications and special achievements.

The date and schedule of Test / interview, if any, will be intimated to the shortlisted applicants through **email ID only** provided in the applications by the candidates. For any enquiries, candidates may contact the office of Secretary, Cochin Port Authority (Ph.No.0484-258 2113) during office hours (0930 hrs to 1730 hrs).

The applications should contain the latest Curriculum vitae, attested copies of Certificates & one latest passport size photo. Candidates should also bring the original certificates and testimonials for verification at the time of Test / Interview.

Sd/-SECRETARY 0484-258-2113





PROFORMA

4	AP	PPLICATION FOR	THE POST OF	••••••	ON CON	TRACT BASIS
1.	N	ame in full (Block l	etters)	:		
2.	F	ather's Name		:		
3.	Α	ge & Date of birth		:		
4.	G	Sender		:		
5.	V	larital Status		:		
6.	R	eligion & Caste		:		
7.	Whether belongs to SC/ST/OBC/PH/EWS:					
8.	Α	ddress		:		
9.	Ρ	hone No.		:		
10.	e.	-mail ID.		:		
11.	l	Educational Qualifi	cation	:		
Sl. No.		Educational Qualification	University/Institution	Year & Month of Passing	Percentage of Marks/Grade	Remarks

^{*} Attested copies of Mark list and Certificate to be attached.

12.	Details of Experience :			
Sl. No.	Designation	Name of Organization	Whether Industrial/ Commercial/Govt. Undertaking	Period of service & nature of work carried out
* Sel	f attested copies of expe	rience certificate	to be attached.	
13.	Languages known			
	a)	spoken :		
	b)	written :		
14.	Other Achievements, if a	nny.	:	
If at giver	I hereby declare that a lest of my knowledge and any point of time, I am any false statement, n ted / terminated without i	d belief and that n found to have c ny application / a	oncealed or distorted a appointment shall liable	aled and distorted any information o
Place Date				
			(SIGNATURE OF	THE APPLICANT