

SYAMA PRASAD MOOKERJEE PORT KOLKATA श्यामा प्रसाद मुखर्जी पोर्ट, कोलकाता 15, STRAND ROAD १५ स्ट्रैंड रोड KOLKATA - 700001 कोलकाता - ७००००१

फैक्स/FAX:(033)22306212 फ़ोन/PHONE(033)71012200 एक्सटेंशन /EXTN - 2309

वित्त बिभाग/FINANCE DEPT.

Subject: Engagement of 3(Three) no. of Trainee Officers on Contractual basis.

Applications are invited from the semi qualified Chartered Accountants / Semi qualified Cost & Management Accountants for engagement as Trainee Officer The remuneration would be Rs. 15,000/- per month.

The incumbent is required to work full time i.e. 9.30 a.m. to 5.30 a.m. (which may be extended depending on work requirement) upto 6 days in a week. In addition to holidays as applicable to Finance Department of SMPK, the incumbent will be eligible for 1 day of casual leave on completion of every month, which may be availed of in a proportionate manner commensurate with the period of completed month of salary.

Applications in the attached format along with the enclosures may be sent to the following e-mail address within 15/07/2021.

recruitment.fa@kolkataporttrust.gov.in

Application received after due date will not be entertained.

APPLICATION FORM FOR DEPLOYMENT OF TRAINEE OFFICER

(Note: Any column left blank will make the application incomplete and liable for rejection. Application received after due date will not be entertained)

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& CH SYAN 15, S	FINANCIAL ADVIS IIEF ACCOUNTS C MA PRASAD MOOF TRAND ROAD, (ATA – 700 001.	OFFICER,	RT, KOLKATA,	Please affix your current photograph
1(a)	Name (in full)	:		
(b)	Father's / Husba (in full)	ind's Name :		
2.	Present Addr communication	ress for :		
3.	Permanent Addre	SS :		
4(a)	Mobile No.	:		
	e-mail Address	:		
5.	Date of Birth	:		
8.	Nationality	:		

9. Educational / Professional Qualifications :

Qualification	Name of Institutions	Year of passing

(Self attested Mark sheets / Certificates are required to be attached)

DECLARATION

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage or not satisfying the eligibility criteria according to the requirements, my candidature / appointment is liable to be cancelled / terminated.

Date : Place : -----

Signature of the Applicant