

**ELECTRONICS SECTOR SKILLS COUNCIL OF INDIA**  
**SME EMPANELMENT FORM**

**1. Personal Data**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No.: \_\_\_\_\_

E-Mail ID: \_\_\_\_\_

DOB: \_\_\_\_\_

Aadhar No: \_\_\_\_\_

**2. EDUCATIONAL BACKGROUND:**

Education level	University/Board	Year	Subject/stream
School			
Graduation			
Post - graduation			
Any Other Specialization			
Any other certification			

**3. Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4. WORK EXPERIENCE (Starting with the Present Job) :**

Details	Current Job	Prior	Prior	Prior
Employer				
Address				
Phone				
Job Title				
Details of Employment	From: To:	From: To:	From: To:	From: To:
Employment Type (Part Time/Full Time/Self-Employed)				

**5. Preferred Location of Working (Where services can be offered):** \_\_\_\_\_

**6. Availability:**  Anytime  Evenings  Weekends  Specific Days (Please mention): \_\_\_\_\_

**7. Area of Interest (Please Tick) :**

- |  |   |
|--|---|
| <input type="checkbox"/> National Occupational Standards (NOS) Development | <input type="checkbox"/> Assessor                   |
| <input type="checkbox"/> Occupational Map (OM) Review                      | <input type="checkbox"/> Content Development/Review |
| <input type="checkbox"/> Qualification Pack (Job Role) Validation          | <input type="checkbox"/> Master Trainer             |
| <input type="checkbox"/> Demand Assessment                                 | <input type="checkbox"/> Question Bank (QB) Review  |

**Attachments Required:**

- PAN Card
- Aadhar Card