



Chandigarh International Airport Limited

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APPLICATION FOR THE POST OF EXECUTIVES AND MANAGERS ACROSS DEPARTMENTS ON FIXED TERM CONTRACT BASIS

Last Date: 15-02-2026

Name of the Post applied: _____

All fields are mandatory. Please read the detailed advertisement posted on the CHIAL Website prior to filling up the form.

1	Name (IN BLOCK LETTERS)	
2	Gender	
3	Father's Name	
4	Mother's Name	
5	Date of Birth & Age as on 15.02.2026	
6	State of Domicile and Nationality	
7	Email Id	

All correspondence to the candidates will be made via e-mail on the e - mail ID provided by the candidate in the application form only. No other method of communication will be adopted.

7(a)	Contact/Current Residential Address	Permanent Address
7(a)		
8	Contact Number(s)	
9	Details of Demand Draft	DD No. _____ Issuing Branch _____ Date of Issue _____

10. EDUCATIONAL QUALIFICATION: (Academic and Professional: 10th standard onwards)

Name of Qualification with specialization (if applicable)	Institution/ University	Nature of the Course (Full Time/ Part Time/Correspondence)	Duration of the Course	Subjects / Specification	Class / Division	Month & Year of Passing
(1)	(2)	(3)	(4)	(5)	(6)	(7)

(Note: Please give full & complete information)

11. Present Salary (if any): _____

12. If selected, how soon can you join? _____

13. No. of years of Post Professional Qualification Experience you possess (in completed years):

_____ Years (as on 15.02.2026) in Company(ies)

14. Professional Experience from the First Job/ Rank onwards to Current Job/ Rank (chronological order): (use separate sheets, if required) (Along with Certificates)

S. N.	Designation / Rank	Organization/ company	Central Govt/ PSU/ Private	Period of working		Gross Pay	Reasons for Leaving
				From (dd/mm/yy)	To (dd/mm/yy)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

(Note: Please give complete details for the experience profile like Date, Month & Year)

I hereby declare that the above statements are true and complete to the best of my knowledge and belief. I understand that in the event the information is found to be false or incorrect, my candidature/appointment may be considered as cancelled/terminated without any notice.

Place:

Signature of the Candidate

Date:

Note: The candidate is required to fill up all the columns. In the event of failure to enclose/ fill up the aforesaid details, the application form will be summarily rejected.