

ASSAM POWER GENERATION CORPORATION LIMITED
Registered Office: Bijulee Bhawan, Paltanbazar, Guwahati-781 001, Assam
CIN:U40101AS2003SGC007239
Tel.No.: 0361-2739502, Fax No.03612739546/22
Web: www.apgcl.org, E-mail: md@apgcl.com

APPLICATION FORM
(All details to be filled in block letters)

AFFIX YOUR
RECENT PASSPORT
SIZE COLOUR
PHOTOGRAPH

Advertisement.No: _____

Dated: _____

Post Applied For: _____

I. Personal Information	
Candidate's Name	
Father's Name:	
Mother's Name	
Gender (Male/Female)	
Caste (General/SC/ST/OBC)	
(Certified Copy of caste certificate issued by competent authority to be attached along with the application.)	
Date of Birth (dd/mm/yyyy)	
(Date of Birth must be supported by a certified copy of birth certificate or Class X or equivalent admit card)	
Age as on 31/10/2018	
Nationality	
Domicile State	
Religion	
Marital Status	
Person with Disability (If any)	
Employee of APDCL/AEGCL/APGCL	
If Yes, Name of Organisation & Designation	

II. Permanent Address:	
Address Line 1:	
Address Line 2:	
District	
State	
Police Station	
Post Office	
PIN code	

III. Correspondence Address:	
Address Line 1:	
Address Line 2:	
District	
State	
Police Station	
Post Office	
PIN code	
Contact No	
Email ID	

IV. Education Qualification:					
Sl No.	Name of the Examination Passed	Board/Institute/University	Year of Passing	Division	Percentage of Marks

(Certified Copies of all relevant marksheets must be enclosed with the application)

V. Post Qualification Experience:					
Name and Address of Organisation/Employer	Post Held & Pay for the post	Job Description (in brief)	Experience		
			No of Years	From	To

VI. Languages Known:			
Language	Read	Write	Speak

VII. Particulars of Application Fee:	
Demand Draft No:	Date:
Amount:	

I hereby certify that all details/documents furnished by me are true to my knowledge and belief. Further, I understand that if any of the above particulars is found false, my candidature will be automatically rejected.

Place:

Date:

Signature of Candidate