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/MOBC)								
(Certified Copy of caste certificate issued by competant authority to be attached along with the application.)								
Date of Birth (dd/mm/yyyy)								
(Date of Birth must be supported by a certifed copy of birth certificate)								
Age as on 01/07/2020								
Nationality								
Domicile State								
Religion								
Maritial Status								
II. Permanent Address:	T							
Address Line 1:								
Address Line 2:								
District								
State								
Police Station								
Post Office								
PIN code								

III. Cor	respondence Address:								
Address Line 1:									
Address Line 2:									
District									
State									
Police Station									
Post Office									
PIN code									
Contact No									
Email ID									
IV. Edu	ıcational Qualification:								
SI No.	Name of the Exa	imination Passed	Во	oard/Institute	Year of Passing	Division	Percentage of Marks		
(Certif	led Copies of all releva	nt marksheets must be	e enclosed v	with the application	 on)				
	guages Known:								
Language Read Read			Write			Speak			
VI. Par	ticulars of Application	Fee:							
Demand Draft No:				Date:	te:				
Amoui	nt:			•					
		s/documents furnished culars is found false, my					understand		
Place:									
Date:			Signature of Candidate						