

## APPLICATION FOR THE POST OF CLERK GRADE-III IN TERMS OF NOTICE REFERANCE NO:ECL/CMD/C-6/RECTT/CLERK-18/33/695 DATED 25.02.2022

Affix Passport size photograph with name & date of taking photograph

(Fill t	up the following detail	s in BLOC	CK letter	s)				Annex	cure-I	
Name	of the Candidate									
Father	's Name		197							
Caste (GEN/SC/ST)			D	Designation						
Present Grade/Cat.				Date of Entry Frade/Cat	in present					
Area Name			C	olliery/Unit	Name					
Whether Physically Handicapped?			Percentage of PH			Type of PH	OH	НН	VH	
Date of Appointment			Date of		Birth					
Quali	fication Details:									
SI. No	Examination Passed	Course Name		Passed or Not	Year of passing	% of marks of Division	& Bo	Board/University		
01	SSC/10 <sup>th</sup>			4						
02	12 <sup>th</sup> /Intermediate									
03	Graduation									
04	Post-Graduation									
Note:	Enclose the self-attest	ed photo co	pies of c	ertificates/te	stimonials/	caste certifica	te/PH co	ertificate	)	
Email- Id					Mobile N	0				

I do hereby declare that the above information is true to the best of my knowledge. I do also hereby undertake that in case I am selected for the post of Clerk Grade-III by the company, I will join in the place where my posting will be made and will not request for change of posting within a period of 03(three) years.

Date:

Signature of the applicant

This is to certify that the above information furnished by the applicant have been verified from the officials records/originals and found correct. Also it is certified that no vigilance case and departmental case is pending against him.

Date:

Signature of Personnel Executive of Area/Unit/Estb. with name and seal

Forwarded to Area Personnel Manager

Annexure-II

AMERICANIC-II	Format for furnishing the details of applicants by Area Personnel Manager Ch. Mgr. (P/Estb) for Hq. as a whole	Mobile Email- vigilance/departm  NO id ental enquiry is going on						
		Email- id						
		Mobile NO						
		Physically Handicapped	Type Percent age			-		
			Туре					
			Yes/ No					
	ager /ch.	Caste/ Ha Category Yes/ No						
	ants by Area Personnel Man	jualifica tions						
		Father's U.Ma Designa Area Unit Grade/C Date of Appointme Name n.No tion Name Name ategory Birth nt						
		Date of Birth						
	of applic	Designa Area Unit Grade/C tion Name Name ategory						
	details	Unit						
	ing the	Area Name						
	or furnish	Designa			14	9		
	Format fo	U.Ma n.No						
		Father's U.Ma Name n.No						
		Name of the Candidate						
		SI.						