

CHHATTISGARH STATE POWER GENERATION CO. LTD.

छत्तीसगढ़ स्टेट पावर जनरेशन कंपनी लिमिटेड

(A Govt. of Chhattisgarh Undertaking)

(छत्तीसगढ़ शासन का एक उपक्रम) CIN: U40108CT2003SGC015821

Phone:-0771-2574408; Fax:- 0771-2574035; mail:-hr.cspgcl@cspc.co.in; website:-www.cspc.co.in/cspgcl

Format for Application

Important Notes:- (i) Before filling this form read the instructions carefully. (ii) All entries should be made in CAPITAL LETTERS (iii) The Application to be made strictly in the following format and to be filled in ENGLISH only. (iv) Please see the bottom of the application form for documents to be enclosed.

1. Post Applied for

--

2. Candidate's Name (IN CAPITAL LETTERS) (please keep one box blank between name, middle name & surname)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3. Fathers's/Husband's Name (IN CAPITAL LETTERS) (please keep one box blank between name, middle name & surname)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. Date of Birth

DD		MM				YY	

5. Age As on (01/07/2023)

DD	MM	YY

Please affix one recent passport size Photograph self attested

6. Domicile :- Chhattisgarh

7. Nationality :- Indian **Any Other**

8. Gender Male **Female** **Other**

9. Category

UR	OBC	SC	ST
<input style="width: 50px;" type="checkbox"/>	<input style="width: 50px;" type="checkbox"/>	<input style="width: 50px;" type="checkbox"/>	<input style="width: 50px;" type="checkbox"/>

10. Whether presently working YES **NO**

11. Total No. of Years of Experience

12. Fee transaction details

UTR No.	Date	Name of Bank	Branch Address	Branch Code	Amount (Rs.)
Candidate Name, Father's Name, address, telephone number, date of birth and category should be written on the transaction details					

14. Candidate's Address : (IN CAPITAL LETTERS Black Ball Point Pen Only)

Communication Address		Permanent Address	
Name :		Name :	
Father's Name :		Father's Name :	
Address :		Address :	
District :		District :	
State :	PIN:	State :	PIN:
Contact No.		Contact No.	
Tel. No. :		Tel. No. :	
Mobile no. :		Mobile no. :	
Mail Id :		Mail Id :	

15. Educational Qualification :-

Exam Passed	Institution/University	% of Marks Obtained (Aggregate)	Year of passing

16. Experience :-

Name of Organization	From	To	Total Experience

DECLARATION

I hereby declare that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect or not satisfying the prescribed eligibility criteria for the post applied for, my candidature is liable to be cancelled/rejected at any stage of selection.

PLACE :
DATE :

(Signature of the Applicant)

Self attested documents to be enclosed with application:-

1. 10th Board Mark Sheet for verification of Date of Birth.
2. Copy of certificates/mark sheets regarding educational qualification.
3. Experience Certificate, if any.
4. Application Fee transaction details with UTR be enclosed with application.
5. C.G. Domicile Certificate
6. Caste Certificate, if applicable.