# CHHATTISGARH STATE POWER HOLDING COMPANY LTD.

[A Chhattisgarh Govt. Undertaking (A successor Co. of CSEB)] (FORMAT OF 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 Language only. (iv) Please see the bottom of the application form for documents to be enclosed. (v) It is suggested that before submission of application, candidates may ensure himself/herself that they are fulfilling the required criteria for the post applied for.

|   | POS   | T APPLIED                                  | FOR           |  |              | LA           | AW A         | SSI   | STAN          | IT             |                  |            |         |        |              |
|---|---|--|---------------|--|--------------|--------------|--------------|-------|---------------|----------------|------------------|------------|---------|--------|--------------|
| Candidate's   | Name (IN  | CAPITAL L                                  | ETTERS) (plea | ase keep   | one bo       | x blank be   | etwe         | en na | ame,          | midd           | le nar           | ne &       | surr    | name)  | )            |
|   |   |  |               |  |              |              |              |       |               |                |                  |            |         |        |              |
| Father's/Hus  | sband's Na  | me (IN CA                                  | PITAL LETTER  | RS) (plea  | ise keep     | one box      | blank        | bet   | ween          | nam            | e, mic           | ldle i     | name    | e & su | ırnaı        |
|   |   |  |               |  |              |              |              |       |               |                |                  |            |         |        |              |
| Date of Birth   | 1   |  |               | <b>4.</b> Age (  | As on 22     | 2 / 09 / 20  | )14)         |       |               |                |                  |            |         |        |              |
|   |   |  |               |  |              |              |              |       |               |                |                  |            |         |        |              |
| DD  | MM  | YY   |               | DD   | MM           | YY           |              |       |               |                |                  |            |         |        |              |
|   |   |  | Please mar    | k (√ ) ti  | ck in th     | ne approp    | <u>priat</u> | e bo  | <u>x</u>      |                |                  |            |         |        |              |
| Category  | ı   | 71   |               |  | <b>6.</b> D  | omicile St   | atus         | (Plea | se Ti         | ck √           | )                |            |         |        |              |
| UR  | OBC   | SC   | ST            |  | (            | Chhattisga   | arh          | Otl   | ner th        | an C           | hhatti           | sgarl      | h       |        |              |
|   |   |  |               |  |              |              |              |       |               |                |                  |            |         |        |              |
| <ul> <li>Marital Stat</li> </ul>  | us Sing   | gle  | Married       |  | <b>8.</b> Na | tionality :- | · Ir         | ndiar |               |                | An               | y Otł      | ner     |        |              |
|   |   |  | ·             |  |              |              |              |       |               | <u>"</u>       |                  |            |         |        | _            |
| . Gender  | Mal   | е  | Female        |  |              |              |              |       |               |                |                  |            |         |        |              |
| O. Whether p  |   | orking ,                                   |               |  |              | 11           | If Ye        | с Т   | ntal N        |                | Years            |            |         |        |              |
|   | $\mu$ r ( $\Lambda$ $I$ $\Pi$ $I$                   | 2262 1/)                                   | YES           | NO   |              | 11.          |              |       |               |                | reare            | •          |         |        |              |
|   | ••  | ease <u>v</u>                              | YES           | NO   |              | 11.          |              |       | ience         |                | reurs            | •          |         |        |              |
| 2. Particulars  | of Deman  | d Draft                                    |               | L  | D.           |              | of E         | xper  | ience         | !              |                  |            |         | t /F   |              |
|   | of Deman  | ease <u>v</u>                              | Name of I     | L  | Bra          | anch Add     | of E         | xper  | ience         | !              | Code             |            | mou     | ınt (F | ls.)         |
| 2. Particulars  | of Deman  | d Draft  Date                              |               | 3ank   |              | anch Add     | of E         | xper  | Bra           | nch            | Code             | A          |         |        |              |
| DD.N  | of Deman  | d Draft  Date  's name, addr               | Name of I     | Bank   | of birth an  | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code             | A          |         |        |              |
| 2. Particulars  DD.N  Candidates  | of Deman  | d Draft  Date  's name, addr               | Name of E     | Bank   | of birth an  | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code             | A          |         |        |              |
| DD.N  Candidates  Candidate's  Name  Father's/  | of Deman  No.  Name, Father  Address f              | d Draft  Date  's name, addr               | Name of E     | Bank   | of birth an  | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | A le of ti | he Der  |        | raft         |
| DD.I  Candidates  Candidate's  Name  Father's/ Husband's  | of Deman  No.  Name, Father  Address f              | d Draft  Date  's name, addr               | Name of E     | Bank   | of birth an  | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | de of the  | e affix | one ro | raft<br>ecen |
| DD.N  Candidates  Candidate's  Name  Father's/  | of Deman  No.  Name, Father  Address f              | d Draft  Date  's name, addr               | Name of E     | Bank   | of birth an  | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | de of the  | e affix | nand D | raft<br>ecen |
| DD.I  Candidates  Candidate's  Name  Father's/ Husband's  | of Deman  No.  Name, Father  Address f              | d Draft  Date  's name, addr               | Name of E     | Bank   | of birth and | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | de of the  | e affix | one ro | raft<br>ecen |
| Candidates Candidate's Name Father's/ Husband's Address   | of Deman  No.  Name, Father  Address f : s Name :   | d Draft  Date  's name, addr               | Name of E     | Bank  The state of | of birth and | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | de of the  | e affix | one ro | raft<br>ecen |
| Candidates  Candidates  Candidates  Candidate's  Name  Father's/ Husband's  Address  District  Contact: | of Deman  No.  Name, Father  Address f : s Name : : | d Draft  Date  's name, addr               | Name of E     | Bank  The state of | of birth and | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | de of the  | e affix | one ro | raft<br>ecen |
| Candidates Candidate's Name Father's/ Husband's Address District Contact:                               | of Deman  No.  Name, Father  Address f : s Name :   | d Draft  Date  's name, addraft  or commun | Name of E     | Bank  The result of the result | e :          | anch Add     | of E         | xper  | Bra<br>ten on | nch<br>the rev | Code<br>erse sid | le of the  | e affix | one ro | ecen         |

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**OBC - Other Backward Class of C.G. State** 

| 14. | Educational | <b>Oualification:-</b> |
|-----|-------------|------------------------|
|     |             |                        |

| S.<br>No. | Exam Passed | Board/ Institution /University | % of Marks Obtained (Aggregate) | Year of<br>Passing |
|-----------|-------------|--------------------------------|---------------------------------|--------------------|
|           |             |                                |                                 |                    |
|           |             |                                |                                 |                    |
|           |             |                                |                                 |                    |
|           |             |                                |                                 |                    |
|           |             |                                |                                 |                    |
|           |             |                                |                                 |                    |

## 15. Experience:-

| Name of Court | From | То | Total Experience in years |
|---------------|------|----|---------------------------|
|               |      |    |                           |
|               |      |    |                           |
|               |      |    |                           |
|               |      |    |                           |

# 16. Other working experience, if any (described in brief) :-

| Name of Institution / Court | Detail in brief | Total Experience in years |
|-----------------------------|-----------------|---------------------------|
|                             |                 |                           |
|                             |                 |                           |
|                             |                 |                           |
|                             |                 |                           |

| <b>17</b> . | Experience [Only for CSPCL Serving Officials] :- |  |  |  |  |  |  |  |
|-------------|--|--|--|--|--|--|--|--|
|             | (i)  | Date of 1st appointment in the MPEB/CSEB/CS Power Company: |  |  |  |  |  |  |
|             | (ii)   | Designation of 1st appointment :                           |  |  |  |  |  |  |
|             | (iii)  | Designation of present post :                              |  |  |  |  |  |  |
|             | (iv)   | Date of appointment / posting of present post              |  |  |  |  |  |  |

| Designation | Date of appointment | Name of Office | From | То | Total Experience in years |
|-------------|---------------------|----------------|------|----|---------------------------|
|             |                     |                |      |    |                           |
|             |                     |                |      |    |                           |
|             |                     |                |      |    |                           |
|             |                     |                |      |    |                           |

#### 18. Permanent Address

| Address  | : |  |
|----------|---|--|
|          | : |  |
|          |   |  |
| District | : |  |
| State    | : |  |
| Pin Code | : |  |
|          |   |  |

Please affix one recent passport size self attested Photograph

### **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)

### Documents to be enclosed with application:-

- **1.** For all candidates Attested copy of 1<sup>st</sup> to final year passed law degree examination mark sheet.
- **2.** 10<sup>th</sup> Mark Sheet (For verification of Date of Birth).
- **3.** Photocopy of valid registration with CG State Bar Council.
- **4.** In case of SC/ST/OBC candidates of CG domicile, attested copy of Permanent caste certificate.
- Application Fee (Demand Draft) in the name of Assistant Manager (CAU), CSPHCL, Raipur payable at Raipur branch only.
- 6. Domicile Certificate.
- **7.** Attested copy of appropriate experience certificate issued by the concern Court.