

ASSAM ELECTRICITY GRID CORPORATION LIMITED





OFFICE OF THE MANAGING DIRECTOR Regd. Office:(FIRST FLOOR), BIJULEE BHAWAN, PALTANBAZAR; GUWAHATI -781001

CIN: U40101AS2003SGC007238GSTIN: 18AAFCA4973J9Z3 PHONE: 0361-2739520Web: www.aegcl.co.in

Affix a copy of

signed photograph here and attach a

APPLICATION FORM (TO BE FILLED UP IN CAPITAL LETTERS)

			copy of the same photograph with the application				
1.		vidual Consultant For Environmental And	ğ				
2.		ГЕ (SHRI/SMTI):					
3.	FATHER'S/HUSBAND'S N.	AME:					
4.	·	YYYY):					
	(Date of Birth must be support	rted by an attested copy of certificate or admi	t card issued by Board/				
	Council of Secondary/ Higher	r Secondary Education)					
5.	AGE ON 01/12/2021:						
6.	NATIONALITY:						
7.	RELIGION:						
8.	STATE OF DOMICILE:						
9.	GENDER (Please indicate $\sqrt{}$):	:Male Female					
10.	ADDRESS FOR CORRESPO	ONDENCE:					
	House No. / Street Name:						
	Village/ City:						
	District	State:					
	Police Station:	Post Office:					
		Mobile No:					
	E-mail:						
11. F	PERMANENT ADDRESS:						
	House No. / Street Name:						
	Village/ City:						
	District	State:					
	Police Station:	Post Office:					
		Mobile No:					
12.	Caste/Category (Please indicate	e): SC ST OBC MOBC					
	(Attested Copy of Caste Certi	ficate issued by Competent Authority must	t be enclosed with the				
	application)						

13. EDUCATIONAL QUALIFICATION(ANNEX EXTRA SHEET IF REQUIRED):

Name of the	Duration	Year of	Name of the Board/	Class/	% of marks
Examination Passed	of Course	passing	University/ Institute	Division	obtained
Degree					
Any Other					
Qualification					
(Please Specify)					

(Attested copies of all relevant mark sheets must be enclosed with the Application)

14. POST QUALIFICATION EXPERIENCE (ANNEX EXTRA SHEET IF REQUIRED):

Name & Address of the	D (II 11	Nature of Job	Experience		
organization/Employer	Post Held		No. of years	From	То

15. PARTICULARS OF APPLICATION FEE:							
Demand Draft No.:		Date:					
Amount:							

DECLARATION

I hereby declare that the particulars furnished above are complete and correct to the best of my knowledge and belief. I understand that if at any stage, it is found that the information given in the application is false or incorrect or I do not satisfy the eligibility criteria, my candidature/engagement is liable to be cancelled.

Date:		
Date:	G. 4 64 1.14	
	Signature of the candidat	e