

$Application\ Format\ for\ the\ post\ of\ Manager/Electrical\ on\ contract\ basis\ vide\ -\ Advt.\ No.\ C-27/2025$

	Name in full (In Block	k letters) :					
	Father's Name	:					
	Date of Birth (DD-MM	M-YY) :				Affix self-	
	Community (SC/ST/	OBC/EWS/Gen):				Passpor	t size
	Religion	:				Photog	graph
	Marital Status -Marri (If Married, mention	ed/Unmarried Spouse Name):		-			
	Whether any of your I If Yes, please provide	Relative is working/work e following details:	ked in Ircon- Yes	s/No			
	Name			Designation			
	Place of Posting			Relationship		<u></u>	
	Nature of Employmen	t: Regular/Contractual/S	Service Contract	:/Deputation/Ten	ure (please t	cick).	
		inority : Yes / No_			•		
	Whether belong to M	illiority : res / No_					
	Last/Present Organiz	zation :					
	(Please tick)	Govt. (Central/State)	PSU	Auto. Bodies	Others		
).		L	<u> </u>				
	Corresp	Correspondence Address		Permanent Address			
	State	Pin	State		Pin		
	State	Pin	State				
	StateContact Number with		State	2			
				2			
 ! -	Contact Number with	STD Code :		2			

Exam Passed	Year of Passing	Name of the Inst./ University	Marks obtained	Max. marks	%age of marks

14. Work Experience as on 01-12-2025

Please give the detailed experience. Attach copy of **Experience Certificate(s)** or acceptable **proof of joining & relieving** in support of experience.

Doot hold with	Name of the		PERIOD		
Post held with scale of pay or gross emoluments	Employer (Give the name of Organisation/ Company)	From Date DD/MM/YY	To Date DD/MM/YY	Total Duration (in Yrs. & Months)	Name of the Project(s on which worked and nature of experience
Total Experience	e = Years	Months		Days	
				Signature	of the Candidate
				(Name	of Candidate)
		<u>Declai</u>	ration_		
I declare that the	information furnished ab	ove by me is tr	rue to the best	of my knowle	dge and belief and that
nothing material h	nas been concealed.				
Place :					
Date :				Signature	of the Candidate

OBC CERTIFICATE FORMAT

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kumari		son/daughter of
	of Village/Town	in District/ Division
in	the State/ Union Territory	belongs to the
con	nmunity which is recognised as a	Backward Class under the Government of
India, Ministry of Social Justice and Em	powerment's Resolution No	
Dated*.		
Chri/Cmt ///um *		and/or his/har family ardinarily reside/a\ in
		and/or his/her family ordinarily reside(s) in
		State/Union
,		ons/sections (Creamy layer) mentioned in
column 3 (of the Schedule to the Gover	nment of India, Department of P	ersonnel & Training OM No. 36012/22/93-
Estt(SCT), dated 8.9.1993 and modifi-	ied vide Government of India,	Department of Personnel and Training
O.M.No.36033/1/2013-Estt. (Res) dated	27.05.2013 and 13.09.2017**.	
Deter		
Date:		DISTRICT MAGISTRATE /
		DY. COMMISSIONER ETC.
(Seal)		
* The authority issuing the certificate in which the caste of the candidate as		s of Resolution of Government of India,
** As amended from time to time.		
Note: The term "Ordinarily" used here the People Act, 1950.	e will have the same meaning a	s in Section 20 of the Representation of