



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



APPLICATION FORM (TO BE FILLED UP IN CAPITAL LETTERS)

Affix a copy of signed photograph here and attach a copy of the same photograph with the application

Advt. No.....

Dated.....

1. APPLIED FOR: TECHNICAL ASSISTANT (Civil)
 JUNIOR TECHNICAL ASSISTANT (Civil)

2. NAME OF THE CANDIDATE (SHRI/SMTI): _____

3. FATHER'S/HUSBAND'S NAME: _____

4. DATE OF BIRTH (DD/MM/YYYY): _____

(Self-attested copies of all relevant document must be enclosed with the Application)

5. AGE ON 01/09/2022: _____

6. NATIONALITY: _____

7. RELIGION: _____

8. STATE OF DOMICILE: _____

9. GENDER: _____

10. ADDRESS FOR CORRESPONDENCE:

House No. / Street Name: _____

Village/ City: _____

District _____ State: _____

Police Station: _____ Post Office: _____

PIN: _____ Mobile No: _____

E-mail: _____

11. PERMANENT ADDRESS:

House No. / Street Name: _____

Village/ City: _____

District _____ State: _____

Police Station: _____ Post Office: _____

PIN: _____ Mobile No: _____

12. Caste/Category (Please indicate): SC ST OBC MOBC

(Self-attested copies of all relevant document must be enclosed with the Application)

13. PHOTO IDENTITY PROOF:

AADHAAR PAN CARD PASSPORT DRIVER'S LICENSE VOTER CARD

(Self-attested copies of all relevant document must be enclosed with the Application)



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

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

(Self-attested copies of all relevant mark sheets must be enclosed with the Application)

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

Name & Address of the organization/Employer	Post Held	Nature of Job	Experience		
			No. of years	From	To

(Self-attested copies of all relevant experience certificates must be enclosed with the Application)

16. LANGUAGES KNOWN:

Language	Read	Write	Speak

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.

Place:

Date:

Signature of the candidate