

ADVERTISEMENT NO. MSEBHCL 01/2021
FORMAT FOR THE POST OF DIRECTOR (OPERATIONS), MSETCL

PART- A

A) PERSONAL INFORMATION

1.	Name in full														
2.	Whether currently(<input checked="" type="checkbox"/>)	Working						Retired							
3.	Present Designation: (In case of retired persons, post held at the time of retirement)														
4.	Office /Department														
5.	Scale of Pay														
6.	Date of Birth	D	D	-	M	M	-	Y	Y	Y	Y				
7.	Age as on the last date of submission of application (11/06/2021)	____Years ____Months ____Days													
8.	Nationality														
9.	Whether belonging to Backward category (<input checked="" type="checkbox"/>)	Yes						No							
10.	[SC/ST/VJ(A)/NT(B)/NT(C)/NT(D)/SBC/OBC]														
11.	Full Address (Office)														
	Tel No														
	Mob No														
	Email														
	Residence														
	Tel No														
	Mob No														
	Email														
12.	Present Emoluments or last emoluments in case of retired person														
	Basic Pay	Rs													
	Dearness Pay/allowance	Rs													
	Special Pay if any	Rs													
	H.R.A	Rs													
	Other Allowances	Rs													
	Total	Rs													

F) Number of terms working as a Director in MAHADISCOM / MAHAGENCO / MAHATRANSCO

Sr. No.	Designation	Name of Company	Duration	
			From Date	To Date

G) List of Publication/Academic honors received:

H) (1) Whether facing any Charge sheet for the criminal offences in any of the court or any FIR for criminal offence is registered against you in any of the police station. : YES/ NO

If Yes, please give details by attaching a separate sheet.

(2) Whether any disciplinary action has been taken against you by your employer in the past or the same is pending or it is under contemplation: YES / NO

If Yes, please give details by attaching a separate sheet.

I) If selected, minimum time required for joining the post:

J) Any other information:(candidates can attach additional sheets for this)

I certify that the details furnished by me, wherever applicable, are true to the best of my knowledge and belief. In addition, it is certified that I meet the eligibility criteria as prescribed in the advertisement for this post.

I further declare that I have not been disqualified as a Director under Section 164 or any relevant sections of the companies Act 2013 r.w.the rules made there under.

Date :

Place:

Signature

Note: (i) Copies of testimonials in support of age, qualifications, experience etc. may be furnished wherever necessary or where it is specifically mentioned.

(ii) MSEBHCL reserves the right to seek information regarding service record and disciplinary action for the candidate from present or previous employers.

PAR T - B
(In case of Deputation)

Name of the Organization:

It is certified that:

1. The date of birth, qualification, experience and other details given by Shri _____, in Part-A have been verified and found correct.
2. The integrity of Shri..... is beyond doubt.
3. No vigilance or disciplinary proceeding is pending or contemplated against the officer concerned.
4. The MSEB Holding Company will be informed at the earliest, if any vigilance or disciplinary proceeding is initiated or contemplated against the officer, after his/her application is forwarded.
5. Up-to-date ACR dossier of the concerned officer is enclosed herewith.
6. It is certified that Shri would be allowed to retain lien in his regular post of during the period of his appointment as Director on deputation basis.

Organization Ref.

No. Date:

Signature of the Authorized Officer
(Name & Designation)
Seal of the Officer

Date :

Place :

Full address of the Authorized
Officer (With telephone/ Fax
No./Email ID)