BOKARO POWER SUPPLY COMPANY (P) LIMITED

(A Joint Venture of SAIL & DVC)

Hall No.M-01, Old ADM Building, Ispat Bhawan, Bokaro Steel City - 827001

Bokaro Steel City

HUMAN RESOURCE DEPARTMENT

BIO-DATA FORM FOR EXECUTIVE POSITIONS

(Write in Capital Letters only)

Application Number		**Post Applied For**	
Full Name			
Date of Birth (D D M M Y Y Y Y)		**Home Town**	
Father's Name			
Mailing Address		**PIN CODE**	
Ph.No. (with STD Code)			
Mobile No.		**Email ID**	

Category (pl tick)	**General**	**SC**	**ST**	**OBC**

Do you belong to PWD Category	**Yes**	**No**	**If Yes, type of disablement**

Employee of BPSCL	**Yes**	**No**	**If Yes, give details**	**Deptt.**	**Designation**	**Staff No.**	**Grade**

Nationality (by Birth/Domicile)	**Religion**	**Marital Status**	**Female/Male**

ANY ATTEMPT TO GET EMPLOYMENT ON THE BASIS OF FALSE INFORMATION OR ON FORGED/FAKE DOCUMENTS WILL ENTAIL REJECTION OF APPLICATION & EVEN RENDER THE CANDIDATE LIABLE FOR PROSECUTION

Education (from 10th / Matriculation onwards):

Sl No.	Examination Passed	Certificate Obtained*	Name of Board/ University	Month & Year of Passing	Division	Percentage of Marks	Rank	For Office Use only
1.	Matric (10th) or equivalent							
2.	Sr.Secondary (Plus2) or equivalent)							
3.	Graduation							
4.	Post-Graduation							
5.	Other Qualification, if any							
6.	Other Qualification, if any							

**Please specify actual certificate/degree obtained*

Subjects studied in the:

Graduation	Post-Graduation

Details of Vocational Training, Research Work Publication etc:

Dates	Particulars

Dates	Particulars

Work Experience:

Name of Employer (Please start with present employment)	Post held & Nature of Jobs	Period		Scale of pay Basic Pay & allowances	Reason for leaving
		From	To		

Extra-Curricular Activities:

	At school	**At college**	**Elsewhere**
Official position e.g. Prefect, Union Officer, Captain etc.			
Societies ad Clubs' Membership, Office held etc.			
Sports Achievements, Office held, e.g. Secretary, Captain etc.			

Name and address of two persons other than relatives to whom we may write for reference:

1.	2.

Family Details:
(Details of spouse, parents, children, brothers and sisters)

Name	Relationship	Age	Qualification	Occupation Details	
				Post held	Name of Organization

Any other information:

I certify that all the information given above are true to the best of my knowledge and belief.

Signature:

Name:

Date:

FOR OFFICE USE ONLY					
Date of birth verified & copy received	Degree checked & copy received	Experience certificate checked & copy received	No Objection Certificate received	Photographs received	SC/ST/OBC/PWD Certificate checked & copy received

Remarks

Date of Interview & Place **Name & Signature of Verifying Official**