Sr. No	Information Required						
1.	Name (in full without initials as per service record)						
2.	Designation						
3.	Date of Birth (in format DD.MM.YYYY as per service record)						
4.	Fatherøs Name(in full)						
5.	Marital Status						
6.	Whether, Spouse working? If yes, give Details- Name, Designation, Department/Organization and present place of posting.						
7.	Number of Children.						
8.	Name of Dependents alongwith their date of birth.	Name of Dependent	Relation	Date of Birth			
9.	Religion			,			
10.	Nationality						
11.	Category						
12.	Date of joining in HPSEB Ltd.						
13.	Previously posted in HPPCL; if yes please specify the place of posting, period and the designation during that period.	Place of Posting	Desig	Designation			
14.	Previous three places of posting alongwith the period.	Place of Posting	Perio	Period			
15.	Places of tribal postings in the entire service alongwith the period.	Places of Posting in triba Area	al Perio	od			

16.	Willing to work in remote areas?					
17.	Choice of stations (maximum three only)					
	•					
18.	Whether faced or contemplated any Disciplinary Proceedings?					
	If yes, the headway/outcome of the Disciplinary Proceedings in process may be given.					
	process may be given.					
19.	Permanent Address (Please give PIN Code also) as per service					
1).	record.					
20.	Educational Qualification, please specify the Month &Year of	Qualification	Month &		Institute	
	Passing of the Qualification and Name of Institute (including		of Passin	g		
	those acquired subsequent to appointment).					
21.	Length of service at each post held may be given.	Post held	ost held		Experience(in years)	
22.	Area of Specialization					
22.	Area of Specialization					
23.	Detail of Technical training undergone, if any	Subject		Period		
23.	Detail of Teelinear training undergone, it any	Buoject		1 0110	u	
24.	Permanent Account No.(PAN)					
25.	Mobile No. & Email ID					
26.	Present Pay scale					
27.	Basic Pay(Pay Band + Grade Pay)					
28.	Date of Next Increment					
20.	But of North Increment					
29.	Date of last LTC availed, please specify the type of LTC i.e.					
2).	self/home town LTC					
30.	Whether availed any extraordinary leave? Please specify the					
	period.					
32.	Number of EL & HPL balance on the date of relieving of					
33.	employee Number of CL &RH on the date of relieving of employee					
33.	Number of CL &RH on the date of reneving of employee					
34.	Bank Account No.					
35.	Bank Branch Name & IFSC Code					