Annexure-'A'

APPLICATION FORMAT

for the position of OSD to Electricity Ombudsman

Self Attested Recent Passport size Photograph

1. Name of the Applicant (In Capital Letter) : ……
2. Father's Name : ……
3. Residence Address: :……
4. Correspondence Address: :……
5. Mobile No. :…….
6. E-mail id :…….
7. Date of Birth (in Christian era) : …….
8. Age (as on 01.07.2026) : ……Years ……. Months ……. Days
9. Whether presently serving or retired :……
10. Date of retirement (if retired) : .....
11. Last post held (if retired) : .....
12. Length of service : ……
13. Last institution worked : .....
14. Present designation (if serving) : .....
15. Scale of Pay & Basic pay/last pay scale, if retired: ……..
16. Education and Professional Qualification :

a) Academic Qualification (in ascending order, starting from high School onward):

Sl. No.	Examination Passed	Board/University	Year of passing	% age of marks
1	2	3	4	5

b) Technical/Professional Qualification:

Sl. No.	Examination Passed	Board/University	Year of passing	% age of marks
1	2	3	4	5

c) Whether Educational and other qualifications required for the post are satisfied:
(If any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same.) Please mention essential and desirable qualification required and possessed by the candidate in the preceding column.

Qualifications/Experience required		Qualifications/Experience possessed by the applicant
Essential	1) Graduate Degree, in Electrical/Power Engineering or equivalent from a recognized University.	
	2) Minimum fifteen (15) years experience of working as Electrical Engineer in any electricity utility.	
Desired	Post graduate degree/diploma in Management /Law.	

17. Details of Employment, in chronological order. Enclose a separate sheet, duly authenticated by your signature, if the space below is insufficient

Office/Instt./ Orgn.	Post held	Nature of appointment whether regular adhoc, Temporary deputation, contract etc.	Period of service		Scale of pay, basic pay and total monthly emoluments	Nature of duty
			From	To		

(Use Separate Sheet, if necessary)

18. Remarks, if any: …….

DECLARATION

I ..... Son / Daughter/wife of .....solemnly declare that the particulars furnished above are correct to the best of my knowledge and belief. I understand that in the event of any of the particulars of information given herein being found false or incorrect, my candidature for the examination/selection is liable to be rejected or cancelled and in the event of any wrong statement/discrepancy in the particulars being detected at any stage even after appointment my services are liable to be terminated without any notice.

Place: .....

Date: …….. Signature of Candidate

List of Enclosures: