

**COMMON APPLICATION FORM FOR TEMPORARY ENGAGING Ex-SERVICE/
Ex-PARAMILITARY PERSONNEL IN VARIOUS POWER PLANTS IN
APGENCO, ON PAYMENT OF MONTHLY HONORARIUM.
DATE OF NOTIFICATION 15.05.2021**

S.No	Variable	Description	
(01)	(02)	(03)	Photo with attestation
1.	Name, Father Name & Address with Pin code and District		
2.	DOB and age as on 01.06.2021		
3.	Gender	Only male are eligible	
4.	Community (√)	OC (), BC-A (), BC-B (), BC-C (), BC-D (), BC-E (), SC () & ST ()	
5.	(a) Identification Marks (b) Mobile No. having Whatsup	Required as per SSC	
6.	Educational qualifications	Must have passed SSC or equivalent examination recognized by the Government of Andhra Pradesh.	
7.	Physical Measurements	General Candidates:- a) Height Must not be less than 167.6 cm b) Chest Must not be less than 86.3 cm round the chest on full inspiration with a minimum expansion of 5 cm. For ST Candidates:- a) HEIGHT :Must not be less than 164 cm b) CHEST : Must not be less than 83 cm round the chest on full inspiration with a minimum expansion of 5 cm.	
8.	Details of previous service from induction to retirement (copies must be enclosed)		
9.	Project/Power Generation Station Preference to work	01. 02.	
10.	Have you ever been convicted ? or remanded by police (If so give details)		
11.	Name of two responsible persons from whom antecedents can be verified together with their address.		
12.	<p>SELF DECLARATION: I, i.e., _____ S/o _____ resident of _____ Town/Village solemnly declare that the information furnished as above is correct and express my consent that I will discharge the allocated functions with dedication with true spirit, at the cost of receiving the Honorarium as fixed by the Management. Further I will bind over to the condition that my engagement will get ceased at any point of time if the Management doesn't satisfied with my work.</p> <p align="right">SIGNATURE OF THE CANDIDATE</p>		

ANNEXURE-1
CERTIFICATE OF PHYSICAL FITNESS

(To be issued by a medical officer not below the rank of Asst. Civil Surgeon)

I do hereby certify that I have examined (full name a candidate for temporary engagement in the Andhra Pradesh Power General Corporation in security wing on payment of monthly Honorarium and cannot discover that he has any disease, constitutional affection of bodily infirmity except that his weight is in excess of below the standard prescribed, or except.

I do/do not consider this a disqualification for the employment he seeks

I also certify that he has marks of vaccination/small-pox

Chest measurement in centimeters in full inspiration/on full expiration/difference (expansion)

Height	Metres	Centimeters
Weight(in K.Gs)		

His vision in normal

Hypermetropic ()
(here enter the degree of defect and the strength of correction glasses)

Myopic ()
(here enter ht degree of defect and the strength of correction glasses)

Astigmatic (simple or mixed) ()
(here enter the degree of defect and the strength of correction glasses)

Hearing is normal, defective (much or slight)

Urine does chemical examination show (i) albumem (ii) Sugar, State specific gravity personal marks (at least two should be mentioned.)

STATION:
DATE:

SIGNATURE:
RANK:
Designation:
Qualification:

Cont...2

The candidate must make the statement required below prior to his medical examination and must sign the declaration appended thereto. His attention is specially directed to the warning contained in the note below:-

01) State your name in full:

02) State your age and birth Place:

- 1) (a) Have you ever had small- pox intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, inflammation of lungs, heart disease, fainting attacks, rheumatism, appendicitis ?

OR

(b) Any other disease or accident requiring confinement to bed and medical or surgical treatment ?

(c) Suffered from any illness, wound or injuries sustained while on active service during the war.

- 2) Have you or any of your near relations been afflicted with consumption, scrofula, gout asthma, fits, epilepsy or insanity ?
- 3) Have you suffered from any form of nervousness due to over work or any other cause ?
- 4) Have you been examined and declared unfit for government or Board service by any Medical Officer/Medical Board within the last three years ? (To be filled in the case of candidate under Class III and Class IV of any Service under Board).

CANDIDATE SIGNATURE

NOTE: The candidate will be held responsible for the accuracy of the above statement. By willfully suppressing any information he will incur the risk of losing the engagement.

Signature:
Member-1

Signature:
Member-2

Signature:
Member-3