

## ODISHA HYDRO POWER CORPORATION LIMITED

Application Form for Graduate Engineer Trainees (GETs)

Advertisement No. OHPC: HQ: HR: RECTT: 01/2025 [Application to be submitted in A4 size paper only]

## FILL IN CAPITAL LETTERS AND SIGN AT THE BOTTOM OF EACH PAGE

1. Post Applied For:			Paste one recent
2. Name (in Capital Blo	ock Letters):		passport size colour photograph signed
First Name:			on the front.
Middle Name:			Do not staple or pin.
Last Name:			
3. (A) Address for Cor	respondence: (Do not mention your na	ime)	
POST-		POLICE STATION-	
DISTRICT-	STATE-		PIN-
Contact Telephone No. E-mail: (Active for the next 06 m	onths)	Mobile No.	
	y Station/Bus Stand from mailing addre	ass mantioned abov	70.
(b) Nealest Nailway	- Station, bus Stand from maining addition	ess memoried abov	с.
State:			
	s recorded in Matriculation or equivale		
Date	Month	Y	ear
5. Age as on 01.05.	2025: Years Month (s)	Da	y (s)
6. Sex (' <b>√</b> ') : Male	Female 7. Marital Sta	itus (' <b>√</b> '):- Unmarrie	d Married
8. Father's/Husban	ıd's Name:		

Genera	al 🗌	sc	ST	SEBC	7		
-			BC categorie	s must attach the	_ attested copie:	s of relevant	certificate
10. State of	f Domicile:						
11. Addit	ional Inforn	nation: (Pleas	e put a ' <b>√</b> ' ma	ark in the appropr	iate box)		
(A) Ex-Serv	viceman		(B) Sp	orts person	(C) PW	/D	
-	nt certificat	_	· •	person/ PWD cat ne Competent Aut	_	attach the att	tested copies of
	e Relaxation	ı claimed:	YES	NO	(Use '	√' mark)	
(B) Exe	emption in f	ee claimed:	YES	NO NO	(Use '	√' mark)	
	•		he detailed a	dvertisement)		•	
Examin Passed/A		Name Institute &		Discipline/Subj	ect Course Duration	Year & Month of Passing	Percentage of marks up-to two decimal points in aggregate
towards proc		al qualificatio		 rcentage (attach p	hotocopies of	the certificat	e and mark sheet
15. Educat	-	ame of the	Disci	pline/Subject	Course Duration	Year & Month of Passing	Percentage of marks up-to two decimal points in aggregate
Examination Passed	Institu					1 4331116	
Examination Passed 10 <sup>th</sup> /HSC	Institu					1 0331118	
Passed	Institu						
Passed	Institu					1 033111g	
Passed	Institu					. ussing	

(Full Signature of the Candidate) \_\_\_\_\_

10	DETAIL	COF	CATE	SCORE	2025
16	$I \supset F \mid \Delta \mid I \mid$	COF	$(-\Delta)$	SCORE.	- ノハノち

GATE REGISTRATION NO	EXAM PAPER	GATE SCORE	MARKS OUT OF 100	ALL INDIA RANK IN THE PAPER

17. Work Experience (if any):

SI. Employers Name & No. Address	Durat (DD/MN		Post Held/ Designation	Nature of Duties/ Work  Details	Gross Annual Emoluments	Pay Scale	
	From To Date Date		= = <del>-</del>	(in Lacs)	33		

18. Particulars of Demand Draft: (SC, ST and PWD candidates are exempted from the payment of fees)

Name and Address of Issuing Bank	Date of Issue	Amount (Rs.)	Demand Draft No.

## 19. Additional Details:

(i) Tick from the following activities to indicate in which one/ all you can perform in Odia language:

(a) Speak Odia	
(b) Read Odia	
(c) Write Odia	

(ii) Tick from the following Odia language eligibility standard (s) applicable:

a. Passed Middle School Examination with Odia as a Language Subject.	
b. Passed HSC or Equivalent Examination with Odia as medium of examination in Non-	
language subject.	
c. Passed in Odia as Language subject in the Final Examination of Class VII from a School or	
Educational institution recognized by the Government of Odisha or the Central Government.	
d. Passed a Test in Odia in Middle English School Standard conducted by the School and	
Mass Education Department of the Govt. of Odisha.	

## **20. DECLARATION:**

I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These conditions are acceptable to me & I fulfil these conditions. I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief and nothing has been concealed therein. I shall furnish the necessary certificates in proof of the above along with the application. I understand that in the event of any information being found false at any stage or not satisfying the eligibility criteria according to the requirements of the post, my candidature/appointment is liable to be cancelled/terminated.

Place:	
Date:	(Full Signature of the Candidate)
List of Supporting documents: (As per the	e detailed advertisement)
1.	
2.	
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12.	