



# Maharashtra Electricity Regulatory Commission

World Trade Centre Center No.1, 13th Floor, Cuffe Parade, Colaba, Mumbai-400005

Telephone: 091-22-22163964/65/69

Fax : 091-22-22163976

Paste Passport  
Size Photo

## Application Form

Application for the post of:

1. Apply for Nomination or Deputation:

2. Full Name (with capital letters)

Surname:

First Name

Father's / Husband's Name:

3. Date of birth:

(DD/MM/YYYY)

4. Gender

5. Category

Write UR for Unreserved

SC for Scheduled Caste / ST for Scheduled Tribe

VJ (A) for Vimukta Jati / NT (B), NT (C), NT (D) for Nomadic Tribe

OBC for Other Backward Class

(VJ (A), NT (B), NT (C), NT (D) & OBC candidates coming under 'Creamy Layer' should indicate their category as GEN).

6. Postal Address

District:

State:

Pincode:

7. Telephone Numbers with STD code

Office:

Residence:

Mobile:

FAX:

EMAIL:

**8. Educational Qualifications: (starting with First Degree)**

Sr. No.	Degree	University/Institution	Year	% of marks obtained	Subject: Major / Subsidiary
1					
2					
3					
4					
5					
6					

**9. Details of Experience:**

Sr. No.	Name & Address of employer	Designation	Job Profile	Period		Duration	
				From	To	Years	Months
1							
2							
3							
4							
5							
6							

**10. Present Salary:****11. Particulars of examination fees:**

Name of the drawee bank and branch	DD No.	Date of DD	Amount (₹)

**Have you ever-faced any Vigilance Enquiry or enquiry by anti-corruption bureau/  
Central Bureau of Investigation or any other Investigative Organization**

**If Yes: Please indicate in brief, the details of the Vigilance Enquiry and outcome thereof (If exonerated, a copy of the order passed by the competent authority may be furnished)**

- Note: 1. Please ensure that no column is left blank;  
2. Extra sheets may be attached if required  
3. Incomplete Applications will be liable to be rejected**

### **DECLARATION**

**I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that if at any stage, it is found that any information given in this application is false / incorrect or that I do not satisfy the eligibility criteria according to the MERC, my candidature / appointment is liable to be cancelled / terminated. I have read and understood the stipulations given in the advertisement and hereby undertake to abide by them.**

**Place:**

**Date:**

(DD/MM/YYYY)

**Signature of applicant:**

# DECLARATION

FORM - A

I, Shri/Smt./Kum. \_\_\_\_\_ son/daughter/wife  
of Shri \_\_\_\_\_, aged \_\_\_\_\_ years, resident of  
\_\_\_\_\_

do hereby declare as follows :-

1. That I have filled my application for the post of \_\_\_\_\_

2. I have \_\_\_\_\_ (Number) living children as on today.

Out of which No. of children born after 25<sup>th</sup> March 2005 is \_\_\_\_\_ (mention date of birth, if any).

3. I am aware that, if any total number of living children are more than two due to the children born after 25<sup>th</sup> March, 2005, I am liable to be disqualified for the same post.

**Place :** \_\_\_\_\_

**Date :** \_\_\_\_\_

**(Signature)**