

WAPCOS LTD.  
 BIO DATA  
 File No. 5/224/Power-Bbsr-Exp  
 Date:08.01.2025

Affix Your  
 Recent  
 Passport  
 Size Colour  
 Photograph

Post applied for \_\_\_\_\_ on fixed term appointment basis for work relating to "various works relating to Water Supply Projects, Hydro Projects and Power Transmission & Distribution Projects in Odisha".

1. Name of Candidate (as recorded in Matriculation or equivalent certificate)

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2. Father's Name (as recorded in Matriculation or equivalent certificate)

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3. Mother's Name (as recorded in Matriculation or equivalent certificate)

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4. Sex

Male		Female	
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5. Religion

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6. Marital Status (If married name of spouse)

Married		Unmarried	
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(Spouse Name & Nationality)

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7. a). Date of Birth

D	D	M	M	Y	Y	Y	Y
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b). Birth Place/District

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c). Birth State/UT

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d). Nationality

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e). Mother Tongue

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f). Age as on date (31/12/2024): Year \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_

8. a). Domicile

b). Blood group

c). Identification Marks

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9. Whether belongs to:

SC	ST	OBC	OBC (NCL)	Minority	PWBMD	General	

10. Languages Known:

Language	Read	Write	Speak

11. Academic/Professional Qualifications:

Sr. No.	Name of Examination	Year of Passing	Univ/Board	Subjects	Marks obtained	% of marks

12. Highest qualification acquired in Hindi: \_\_\_\_\_

13. Training received if any: \_\_\_\_\_

14. Experience as on 31.12.2024 (Please give details thereof, use separate sheet if required)

Organization	Period		Designation & Description of Duties	Scale of Pay/ Gross Salary
	From	To		

15. Correspondence Address:

PIN..... Phone.....

16. Permanent Address:

PIN..... Phone.....

17. PAN:

18. Aadhar No.:

19. Guardian/Emergency Contact No.:

20. Contact Mobile No.:

21. Valid E.Mail ID:

22. Passport No.:

23. Any other information:

Information must be filled against each column clearly. In case incomplete application, the same will not be considered.

I solemnly declare that the above information is true/correct and I understand that in the event of the information found to be incorrect after my appointment, I shall be liable to be dismissed from service.

**Date**

**Signature**