



TELANGANA STATE POWER GENERATION CORPORATION LIMITED  
VIDYUT SOUDHA :: HYDERABAD – 500 082.

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NOTIFICATION NO.1/CGM(ADM)/2018, DATED.13.04.2018,  
FOR THE RECRUITMENT TO THE POST OF ASSISTANT MANAGER (HR)

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The candidates who have responded to the notification No.1/2018, Dt.13.04.2018 and appeared for the written examination held on 27.05.2018 for selection to the post of Assistant Manager (HR) in TSGENCO are hereby informed that on the basis of written examination, the candidates listed in the Annexure are hereby called for provisional verification of their Academic Qualifications and other related certificates.

2. The candidates who have been called for verification of certificates shall be required to submit the following **Original Certificates** along with two sets of Xerox copies duly attested by Gazetted Officer: -

- (i) Date of Birth Certificate. (SSC)
- (ii) School Study Certificate.  
(Bonafide Certificate Or School Study Certificate from 4<sup>th</sup> Class to 10<sup>th</sup> Class)
- (iii) All certificates relating to academic qualifications as required. (Inter and Degree)
- (iv) Community Certificate. (Integrated)
- (v) Latest Non-Creamy Layer Certificate in case of Backward Classes  
(Specimen Copy Enclosed).
- (vi) Certificate of Residence/Nativity.  
(Specimen Copy Enclosed).
- (vii) No objection certificate from the existing Employer where he/she is working.
- (viii) Attestation Form in Quadruplicate;
- (ix) Copy of Hall Ticket and Online Application;
- (x) Employment Exchange Registration Card, if any;
- (xi) Copy of Aadhar Card.

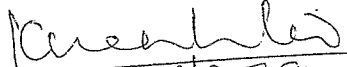
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- (xii) Medical Certificate for the Visually Challenged.  
(Certificate issued by the Government Medical Officer of rank not lower than that of Civil Surgeon or District Medical Officer)
- (xiii) Bond and Undertaking (Specimen Copy Enclosed).
- (xiv) Experience in Reputed Manufacturing Company not less than 8 (eight) years along with documentary evidence, EPF/Bank Statement and contact details of the concerned Officials of that Manufacturing Company.

**Note:** No request will be entertained for submission of any of the above certificates at a later date. After verification of certificates, the Original Certificates will be retained with TSGENCO.

3. The Certificates of the candidates will be verified at Room No.255, A-Block, Vidyut Soudha, Hyderabad – 500 082 on 04.08.2018 from 10.30 AM onwards.
4. The candidates are further informed that on verification of their certificates if any candidates found to be not eligible with reference to the particulars/information furnished by him/her in the “Online Application Form”/Certificates, the candidature of such candidate shall be disqualified for selection.
5. The candidates are also hereby informed that they shall attend for verification of original certificates on the date notified by making his/her own arrangement and that they are not entitled for any reimbursement of Travelling/Dearness Allowance. The request for change of scheduled dates will not be entertained under any circumstances and if failed to attend or failed to produce the requisite documents/certificates on the above said date, their candidature will be disqualified and he/she will not have any right to claim appointment for the post of Assistant Manager (HR) in terms of the notification.
6. Furthermore, the candidates are also hereby informed that mere verification of their Original Certificates doesn't confer on them any right whatsoever for selection/appointment as Assistant Manager (HR).

  
21/08/2018

**CHIEF GENERAL MANAGER (ADMINISTRATION)**

**ANNEXURE**

The List of Candidates called for Provisional Verification of their Academic Qualification and other related Certificates are hereunder:

Sl. No.	HALL TICKET NO	CANDIDATE NAME	FATHER NAME	DOB	Comm ID
1	2010024	YERADLA VENUDHAR REDDY	Y CHANDRA REDDY	23/04/1986	OC
2	2010104	GOWTHAMI CHINTHALA	MOHAN RAO	28/08/1982	OC
3	2010052	NAGARAJU CHATLA	BALAI AH	04/08/1981	BC-B
4	2010022	USHA RANI A	A GANGI REDDY	14/12/1981	OC
5	2010041	B EVELIN SHALINI	B I VIJAYAKUMAR	07/04/1986	BC-C
6	2010001	NEELIMA MACHI	NAWAZ REDDY MACHI	08/04/1977	OC
7	2010006	R APRAIM	R RATNAM	12/04/1974	SC
8	2010075	KGAUTAMI PRIYA DHARSHINI	KSIMHA CHALAM	02/11/1984	SC
9	2010082	SWATHI PAKSHULA	SATHAIAH	03/07/1984	SC
10	2010084	RACHARLA SHARATH BABU	RACHARLA KUMARA SWAMY	03/08/1984	BC-B
11	2010034	SATEESH	PEDDANNA	10/06/1983	BC-D
12	2010016	MADHUSUDAN REDDY S	VENKAT REDDY S	10/10/1983	OC
13	2010012	P SWAPNA	P SATYANARAYANA	24/08/1986	BC-B
14	2010048	G HARI KRISHNA	G ANJANEYULU	29/08/1981	BC-D
15	2010099	G M VENKATESH	G D MAISAIAH	13/12/1980	BC-A
16	2010107	MOTUPALLI SAI KEERTHI	MOTUPALLI SAMPATH KUMAR	05/03/1982	OC
17	2010002	N VISHNU CHARY	N BALAIAH	12/05/1972	BC-B
18	2010045	S HARPREETH KAU R	S JOGA SINGH	31/05/1982	BC-A
19	2010096	MD SALMA	MOHD YAKUB ALI	16/08/1984	BC-B
20	2010019	SRILALITHA RYALI	R RAMA CHANDRA MURTHY	20/05/1983	BC-B
21	2010078	GANJI KALYANI	GANJI SANJEEVAIAH	25/07/1982	BC-B
22	2010066	R LAXMI	HANUMANTHA RAO	18/08/1985	BC-B
23	2010081	PRATHYUSHA BIRUDARAJU	BHASKAR RAJU	15/08/1986	BC-D
24	2010206	TALAMALA KIRAN KUMAR ROY	TALAMALA RAYAPPA	18/12/1970	SC
25	2010073	AB SRINIVAS KUMAR	A BHASKER	22/06/1984	SC
26	2010004	UMA DEVI PAGIDI	ANTHAI AH	10/08/1987	BC-A

*K. Venkatesh*  
31/08/2018

**CHIEF GENERAL MANAGER (ADMINISTRATION)**

## CERTIFICATE OF PHYSICAL FITNESS

Name, Rank and Medical Qualifications  
of an Officer Granting the Certificate with  
Register Number.

I do hereby certify that I have examined (full name \_\_\_\_\_) a candidate for employment under the Telangana State Power Generation Corporation Limited, in the O&M service as \_\_\_\_\_ and cannot discover that he has any disease, constitutional affection or 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 do further certify that in my opinion his general physical condition is such as to enable him to perform efficiently the active duties of executive service.

I also certify that he has marks of Small Pox/Vaccination.

Chest Measurement in centimeters in full inspiration/on full expiration/difference (Expansion).

Weight (in kgs)	Height	Meters	Centimeters.
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His Visional  
Is Normal

Hypermetropic ( \_\_\_\_\_ )

(Here enter the degree of defect and the strength of correction of glasses).

Myopic ( \_\_\_\_\_ )

(Here enter the degree of defect and the strength of correction of glasses).

Astigmatic (simple or mixed) ( \_\_\_\_\_ )

(Here enter the degree of defect and the strength of correction of glasses).

Hearing is normal/defective (Much or slight).

Urine-Does chemical examination show(1) albumen, (2) Sugar, if so state specific gravity.

Personal Marks (atleast two should be mentioned)

i)

ii)

Station:  
Date:

Signature  
Rank/Qualification:  
Designation:

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.

1. State your name in full:
2. State your age and birth place:
3. a) Have you ever had small pox, intermittent or any other fever, enlargement or suppuration of glands splitting 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 treatments?  
  
 c) Suffered from any illness, wound or injuries sustained while on active services during the war.
4. When were you last vaccinated?
5. Have you or any of your near relations been afflicted with consumption, scrofula, gout, asthma, fits, epilepsy or insanity?
6. Have you suffered from any form of nervousness due to over work or any other cause?
7. Have you been examined and declared unfit for Government or GENCO service by any Medical Officer/Medical board within the last three years?  
(To be filled in only in the case of candidate under Class-III and Class-IV of any service under GENCO)
8. Furnish the following particulars concerning your family.

Father's age if living and state of health	Father's age at death & cause of death	No. of brothers living, their ages & State of health	No. of brothers dead, their ages and cause of death.

Mother's age if living and state of health	Mother's age at death & cause of death	No. of sisters living, their ages & State of health	No. of sisters dead, their ages and cause of death.

I declare that all the above answers are true and correct to the best of my knowledge.

CANDIDATE'S SIGNATURE

**NOTE:** The candidate will be held responsible for the accuracy of the above statement. By willfully suppressing any information he/she will incur the risk of losing the appointment and if appointed for forfeiting all claims to superannuation allowance or gratuity.

**CERTIFICATE OF RESIDENCE**

(To be produced by such candidates who have not studied in any educational institution during the whole or any part\* of the relevant 4/7 years period but claim to be local candidates by virtue of residence for post codes for which there is reservation for local candidates.)

**It is hereby certified.**

(a) That Sri/Smt/Kum. \_\_\_\_\_, S/o,D/o. \_\_\_\_\_  
\_\_\_\_\_, appeared for the first time for the Matriculation (S.S.C.)  
Examination in \_\_\_\_\_ (Month) \_\_\_\_\_ (Year).

(b) That he/She has not studied in any educational institution during the whole/or part of the 4/7 consecutive academic years ending with the academic year in which he/she first appeared for the aforesaid examination.

(c) That in the 4/7 years immediately preceding the commencement of the aforesaid examination he/she resided in the following place/places namely:

Sl.No	Village	Mandal	District	Period
1				
2				
3				
4				
5				

Office seal:

Station:

Dated:

Officer of Revenue Department  
[Not below the rank of Tahsildar  
holding independent Charge of  
a Mandal].

\* STRIKE OFF "WHOLE"/PART AS THE CASE MAY BE

**BOND**

Known all men by these presents that we (1) principal

Debtor \_\_\_\_\_

S/o, D/o. \_\_\_\_\_

(Status of Parent) \_\_\_\_\_

Resident at \_\_\_\_\_

in the District of \_\_\_\_\_

in the Mandal of \_\_\_\_\_

(2)

(1<sup>st</sup> Surety) Son of \_\_\_\_\_

Residing at \_\_\_\_\_ in

the District of \_\_\_\_\_ in the

Mandal of \_\_\_\_\_

(3)

(2<sup>nd</sup> Surety) Son of \_\_\_\_\_

Residing at \_\_\_\_\_

in the District of \_\_\_\_\_

in the Mandal of \_\_\_\_\_

bind ourselves jointly and severally to the Telangana State Power Generation Corporation Limited (hereinafter referred to as the TSGENCO) which expression shall, where the context so admits include its successors for payment of (i) Rs.50,000/- plus stipend received or (ii) Rs.1,00,000/- as the case may be by way of liquidated damages to the TSGENCO.

Signed by us this the \_\_\_\_\_ day of \_\_\_\_\_ 2016

Signatures: 1. \_\_\_\_\_ (Debtor)

2. \_\_\_\_\_ (1<sup>st</sup> Surety)

3. \_\_\_\_\_ (II<sup>nd</sup> Surety)

Witness: 1. \_\_\_\_\_

2. \_\_\_\_\_

Whereas the above (1) \_\_\_\_\_ (Principal

Debtor) is appointed as \_\_\_\_\_ in the

Telangana State Power Generation Corporation Limited Services.

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SIGNATURE of CANDIDATE

2. And whereas it has been agreed that the above bounden

(1) \_\_\_\_\_ shall enter into a service bond for the above-mentioned sum with such conditions as hereunder written with the above bounden.

(2) \_\_\_\_\_ and above bounden

(3) \_\_\_\_\_ as sureties.

3. Now the conditions of the above written bond are such that (i) if for any reason other than death or disability or other causes acceptable to the TSGENCO, the bounden leaves the Corporation during the period of training he/she shall refund to the TSGENCO the amount of stipend received by him/her plus Rs.50,000/- (Rupees fifty thousand only) by way of liquidated damages within one month of demand (ii) The above bounden (1)

\_\_\_\_\_ shall serve the TSGENCO for a full period of five years after successful completion of training and shall during such period of service abide by all the Rules and Regulations as will be applicable to him/her. If for any reason other than death or disability or other causes acceptable to the corporation, the Bounden fails to serve the TSGENCO for atleast five years he/she shall pay the TSGENCO by way of liquidated damages a sum of Rs.1,00,000/- (Rupees one lakh only) within one month of demand. Unless the said bounden (1)

\_\_\_\_\_ is prevented by accident or ill-health certified by a competent medical authority for serving the TSGENCO at least for a period of five years, or the above bounden (1)

\_\_\_\_\_ is removed from service for any misconduct before the expiry of the said period of five years, or shall for reasons acceptable to the appointing authority that he/she is unable to comply with all or any of the terms and conditions of employment above named. The above bounden (1)

\_\_\_\_\_ and \_\_\_\_\_ or (2) \_\_\_\_\_ (1<sup>st</sup> Surety) and or

(3) \_\_\_\_\_ (2<sup>nd</sup> Surety) shall at all times within thirty days of the receipt of notice in writing from the appointing authority pay all sums of money that may become payable or refundable to the TSGENCO by the above bounden under any by virtue of the above conditions of the bond.

4. Provided that any forgiveness or forbearance on the part of the TSGENCO towards the above bounden in respect of his/her failure or neglect to perform such services and duties or any forbearance or indulgence shown by the said TSGENCO whether as to payment, time for performance or otherwise shall not any way release or exonerate the sureties or either of them, their or either of their executors or administrators in respect of their or his/her liability under the above written bond.

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SIGNATURE of CANDIDATE



5. And the TSGENCO without prejudice to any other rights may recover such sum or sums of money as may be due from the above bounden (1) \_\_\_\_\_  
(2) \_\_\_\_\_ (3) \_\_\_\_\_  
by virtue of this bond, as were arrears of land revenue under the act pertaining to the recovery of land revenue inforce.

Signed by the above bounden (1)

(a) Postal Address :

(b) Permanent Address :

Signed by the 1<sup>st</sup> Surety (2)  
With postal address

Official Designation. :

Official Address :  
(if he/she is an employee of  
the State/Central Govt.,/  
Corporation etc.,)

Permanent Address :

Signed by the 2<sup>nd</sup> Surety (3)  
With postal address

Official Designation :

Official Address :  
(if he/she is an employee of  
the State/Central Govt.,/  
Corporation etc.,)

Permanent Address :

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Witness:  
(and their address in full)

(1)

(2)

NOTE: The Sureties must be:

- i. Persons working in Central/State/Quasi Governments/Under-takings with a minimum of 8 years of service left with their employers. (*Service Certificate from the employer with his/her Date of Birth shall be enclosed*)  
(OR)
- ii. Persons holding encumbered immovable property worth about Rs.1.00 Lakh and above on production of encumbrance certificate and property valuation certificate from office of the M.R.O. where the property is situated (*necessary certificate from the concerned Tahsildar Shall be enclosed.*)

SIGNATURE of CANDIDATE

**FORMAT - I**

**UNDERTAKING**

I, \_\_\_\_\_,  
as per Notification No.2/CGM(Adm)/2018, Dt.13.04.2018, appointed as Junior  
Accounts Officer in Telangana State Power Generation Corporation Limited  
undertake that, I abide by the Rules and Regulations applicable or as framed  
by the Telangana State Power Generation Corporation Limited and as amended  
from time to time, that the Tripartite Agreements entered into between APSEB,  
Government of T.S, and the APSEB Employees Associations are not applicable  
to me as such agreement was entered into when I was neither an employee of  
erstwhile APSEB/Composite APGENCO nor a member of any Employees  
Association and hence that I shall at no stage be entitled to claim any right  
whatsoever arising out of the said Tripartite Agreement.

SIGNATURE OF THE CANDIDATE

**ANNEXURE - II**

**FORM - VII B**

Serial No.

District Code:

BC - **A/B/C/D/E**

Emblem

Mandal Code:

Certificate No.

Village Code :

**Creamy Layer/Non-Creamy Layer Certificate for  
Backward Classes Groups - A, B, C, D & E applying for appointments to  
Civil Posts and Services within the State of Telangana.**

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This is to certify that Shri/Smt/Kumari \_\_\_\_\_  
Son/Daughter of \_\_\_\_\_ Village/Town \_\_\_\_\_  
Door No. \_\_\_\_\_ Street Name \_\_\_\_\_ in the \_\_\_\_\_  
Talukar in \_\_\_\_\_ Mandal \_\_\_\_\_ in the Telangana State belong to \_\_\_\_\_  
community \_\_\_\_\_ Religion which is recognized as a Backward Class  
under Group \_\_\_\_\_ at Sl.No. \_\_\_\_\_ in the State of Telangana Vide G.O.Ms.No.34, BC  
Welfare (OP), Dept., Dt.08.10.2015. This is also to certify that he/she does/does not  
belong to persons/sections (Creamy Layer) Mentioned in Column - 3 of the Scheduled to  
the Government of India, Department of Personnel & Training O.M.No.36012/22/93-  
Estt. (SCT), Dtd.08.09.1993, adapted by Government of Telangana Vide G.O.Ms.No.20,  
BC Welfare (OP) Dept., Dtd.31.10.2017.

**ISSUING AUTHORITY\***

Signature:

(Seal)

Date:

Name in Capital Letters:

Designation:

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\* All the Revenue Officials in the State of Telangana not below the rank of Tahsildars.

Latest colour  
passport size  
Photograph of  
the candidate

**REVISED ATTESTATION FORM**

(THE CANDIDATE SHOULD PROPERLY FILL THE ATTESTATION  
FORM WITH HIS/HER OWN HAND WRITING)

Name of the  
Department

Name of the Head  
of the Dept.

1. (a) Name in full (capital letters only) with aliases, if any. Please indicate if you have added/dropped at any stage any part of your name/surname.

SURNAME

NAME

- (b) Designation of the candidate with category (Appointment by Direct recruitment/Ex-Servicemen quota/compassionate ground)  
**Enclose supporting certified copies of the documents.**

(i) Designation

(ii) Place of working

(iii) Date of Entry into  
Service or Date of  
Appointment

(iv) Direct recruitment  Ex-serviceman  Compassionate

2. **Details of addresses:**

a. Present

b. Permanent

House/Apartment/Flat No.

Name of Apartment

Lane Name

Street & Road

Village

Mandal/Taluk

Town/City

District

State

Pin Code

Contact Phone Numbers

Mobile	Landline office (with STD code)	Landline Res (with STD code)

(c) If originally a resident of Pakistan, the address in that Dominion and the date of migration to Indian Union.

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3 Particulars of places where you have resided during the *preceding five years* from the date of filling up of Attestation Form.

	From (Month/Year)	To (Month/Year)	Residential Address in full (i.e., House/Apartment/ Flat Number, Apartment/Complex/Lane/ Street/Colony and Road, Village, Mandal and District/City)	Police Station and District
1.				
2.				
3.				
4.				
5.				

4 Father's details:

a) Name in full with aliases, if any

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b) Profession

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c) If in service, give designation and official address.

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d) Present postal address (if dead, give last address)

House No.	
Lane Name	
Street & Road	
Village/Mandal	
Dist	
State	
PIN Code	

e) Permanent House Address

House No.	
Lane Name	
Street & Road	
Village/Mandal	
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State	
PIN Code	

5. (i) Nationality of :

(a) Father

(b) Mother

(c) Wife/Husband

(ii) Place of birth of Wife/Husband

6 (a) Date of birth of the applicant

(b) Present Age

(c) Age at SSC / Matriculation

7 (a) Place of birth, District and State

(b) District and State to which you belong

8 (a) Religion

(b) Are you a member of Scheduled Caste / Scheduled Tribe / Backward Class?

Scheduled Caste  Scheduled Tribe  Backward Class

Please specify the Class/Tribe Grade A, B, C, D & E.

9 Educational Qualifications showing places of education with years in schools and colleges since 15<sup>th</sup> year of age (Please enclose certified copies of Study Certificates and indicate whether study is regular or distance/ correspondence).

Course	Name of the school/ College with full address (village/Mandal/ District/City)	Date of entering (mention month & year)	Date of leaving (mention month & year)	Examination passed with Reg. No., etc., (Name of the group i.e., Inter/ Degree/Diploma/ PG, etc)	Police Station and District
1. SSC/ Matriculation					
2. Intermediate /Diploma					
3. Graduation/ Professional Course.					
4. Post Graduation					
5. Any other qualification					

10 If you have at any time been employed, give details. (Please enclose certified copies of the documents).

Designation of Post held or description of work	Period		Full Address of the Office, Firm or Institution	Have you been at any time dismissed / removed from service / resigned to the post? If so, please give details.
	From	To		

11 Have you ever been arrested by the police, convicted by a Court of law or detained under any state / central preventive detention laws for any offence? Whether such conviction sustained in the Court of Appeal or set aside by the Appellate Court if appealed against.

(Note: If detained, convicted, debarred etc. subsequent to the completion and submission of this form, the details should be communicated immediately to the concerned Department or the authority to whom the Attestation Form has been sent earlier, as the case may be, failing which it will be deemed to be suppression of factual information). If the answer is 'Yes', the full particulars of the conviction, sentences and detention should be given.

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12 Name and complete address of two responsible persons of your locality to whom you are known or two referees to whom you are known. **(persons shall not be blood relatives)**

	Referee-1	Referee-2
House/Apartment/ Flat No.		
Name of Apts./ Complex		
Lane Name		
Street & Road		
Village		
Mandal/Taluk		
Town/City		
District		
State		
Pin Code		

13 Have you ever been member/worker of any Political Party or Communal organization/Youth/Student/ Service/ Labour? If so furnish details.

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**DECLARATION SHOULD BE SIGNED BY THE CANDIDATE**

1. I hereby declare that the statements made in this form are true to the best of my knowledge and belief.
2. I am married/unmarried and have only one wife living (delete which is not applicable).
3. I am fully aware that furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification and is likely to render me unfit for employment under the Government.
4. I am also fully aware that if it comes to notice at any time during my service that false information has been furnished or that there has been suppression of factual information in the Attestation Form, my services would be liable to be terminated solely on this ground.

**Signature of the candidate**

Date :

Place :

**CERTIFICATE TO BE SIGNED BY A GAZETTED OFFICER OR MEMBER OF  
LEGISLATURE OR OTHER AUTHORITY AS PRESCRIBED BY THE  
APPOINTING AUTHORITY.**

Certified that I have known Sri/Smt/Kum \_\_\_\_\_

\_\_\_\_\_ Son/Daughter/Wife of \_\_\_\_\_

for the last \_\_\_\_ years \_\_\_\_\_ months and to the best of my knowledge and belief, the particulars furnished by him/her are correct.

Date :

Place :

**(Signature)**

**Name & Designation with seal.**

Photograph of the  
candidate attested  
by Gazetted  
Officer/MLA/  
Other with seal.  
Competent  
Authority.



## SCHOOL STUDY CERTIFICATE

Note: Should be obtained from the Head of Educational Institution (s)

1. Name of the candidate:
2. Father's Name:
3. Date of Birth and Age:

Class	Name and place of School	District	Duration of Study Giving Month and Year
IV			
V			
VI			
VII			
VIII			
IX			
X or SSC			

Station:

Date:

Signature of the Head of the  
Educational Institute (S)