GOVERNMENT OF PUNJAB DEPARTMENT OF POWER (Energy Branch)

ADVERTISEMENT FOR THE POST OF DIRECTOR/FINANCE IN PUNJAB STATE POWER CORPORATION LIMITED

Applications are invited for the post of Director/Finance in Punjab State Power Corporation Limited (PSPCL) at Patiala in HAG Scale of Rs.67000-79000 (unrevised) without Grade Pay.

a)	Basic Qualification:	Chartered Accountant or Cost Accountant (ICWA).	
b)	Age:	Minimum age 50 years at the time of appointment.	
c)	Experience:	 i) worked for atleast twenty five (25) years, and ii) worked in a senior position in Finance/Accounts with the rank equivalent to CE/General Manager Accounts for atleast one year or 5 years of experience as CAO in a company having an annual turnover of not less than Rs.500 Crore, and iii) worked at the level of Director of the company or one level below Board level position at least one 	
		year in case of candidate from private sector.	
d)	Preference:	Preference will be given to the person having worked in a position equivalent to SE/CE in the field of Regulatory Affairs and Commercial matters like tariff fixation and sale purchase/ trading of power.	
e)	Superannuation & Tenure:	5 € CAMPAGNA DE CONTRE CONTRE CONTRE CONTRE DE CAMPAGNA DE CAMPAG	

HOW TO APPLY:

Applications neatly typed in English and duly signed alongwith copies of certificates/documents in respect of proof of age, basic/essential qualifications, experience in the prescribed format and "No Objection Certificate" from the concerned organization where already employed must be sent by Registered Post or in person in a cover subscribed "APPLICATION FOR THE POST OF DIRECTOR/FINANCE, PSPCL" should reach in the office of the Superintendent (Energy Branch), Department of Power, Government of Punjab, Room No.315, 3rd Floor, Punjab Civil Secretariat-2, Sector-9, Chandigarh latest by 29.04.2022 upto 5:00 PM.

lied for: me (as /Ms.): ne Applica npany: Employm applicable municatio	(Through Proper Chan Name of the post applied for: (a) Applicant's Name (as records Mr./Mrs./Ms.): (b) Designation of the Applie (c) Name of the Company: (d) Category as per Employ (Please Tick as applicab (e) Office Address: (f) Address for communication Telephone No. Office: E-Mail ID: Date of Birth (DD/MM/YY):	per official ant (in full): nent Status: e) n: Resid	Governme India S	officer of a ent/Armed Services/SI	CPSE/C Forces o PSE/Priv	of the Union/ vate Sector	
me (as /Ms.): ne Applicante pany: Employmapplicable munication	 (a) Applicant's Name (as records Mr./Mrs./Ms.): (b) Designation of the Applic (c) Name of the Company: (d) Category as per Employ (Please Tick as applicable) (e) Office Address: (f) Address for communication Telephone No. Office: E-Mail ID: 	ant (in full): nent Status: e) n: Resid	Governme India S dence	ent/Armed Services/SI	Forces o PSE/Priv	of the Union/ vate Sector	
/Ms.): ne Application applicable munication	records Mr./Mrs./Ms.): (b) Designation of the Applic (c) Name of the Company: (d) Category as per Employ (Please Tick as applicab (e) Office Address: (f) Address for communication Telephone No. Office: E-Mail ID:	ant (in full): nent Status: e) n: Resid	Governme India S dence	ent/Armed Services/SI	Forces o PSE/Priv	of the Union/ vate Sector	
npany: Employm applicable municatio	 (c) Name of the Company: (d) Category as per Employ (Please Tick as applicab) (e) Office Address: (f) Address for communication Telephone No. Office: E-Mail ID: 	nent Status: in: Resid	Governme India S dence	ent/Armed Services/SI	Forces o PSE/Priv	of the Union/ vate Sector	
Employn applicable municatio	 (d) Category as per Employ (Please Tick as applicab) (e) Office Address: (f) Address for communication Telephone No. Office: E-Mail ID: 	n: Resid	Governme India S dence	ent/Armed Services/SI	Forces o PSE/Priv	of the Union/ vate Sector	
npplicable	(Please Tick as applicable) (e) Office Address: (f) Address for communication Telephone No. Office: E-Mail ID:	n: Resid	Governme India S dence	ent/Armed Services/SI	Forces o PSE/Priv	of the Union/ vate Sector	
	(f) Address for communicate Telephone No. Office:E-Mail ID:	Resid		Mo	obile No) .	
	Telephone No. Office:	Resid		Mo	obile No) .	
	E-Mail ID:			Mo	obile No).	
	E-Mail ID:						
YY):	Date of Birth (DD/MM/YY):						
ate of Birth (DD/MM/YY):							
ssional ((i) Educational/Professional	Qualification:					
	Qualification* Name of Institution	Period of Study	qualific		claration Wh is the eligibi ualification equirement		
		Full Time	Correspondence	e Degree	Mandator	y Desirable	Other
ree/Certif	uld be exactly as per Degree/Cer	icate issued b	y the Univers	ity.			
ng the la	ii) Postings held during the l	st 25 years:					
	Complete Designation & Organization Place of posting*	Pay Scale**	Period	to	mation e	nandatory xperience equirement	t,
n	Complete Nar Designation & Org	ne of the	ne of the Pay	ne of the Pay Period	ne of the Pay Period Reporting	ne of the anization Scale** Period Reporting to model Designation expression recognition	me of the Pay Period Reporting Does it mee to mandatory

*Should be exactly as per specific office order issued by the CPSE/Ministry/SP.

**Private Sector-CTC/remuneration/emoluments drawn

NB: the positions should be indicated in order of the most recent assignments.

6.	(a)	Do you hold lien in any organization other where currently working if Yes: i) Name of the Organization in which the lien is held: ii) Date from which the lien is held:	Yes No
	(b)	Are you on deputation? If Yes: i) Name of parent Organization: ii) Date from which on deputation:	Yes No
7.	(a)	Whether any penalty/punishment was awarded to the applicant during his/her service: If yes, the details thereof: i) Civil/Criminal ii) Departmental Inquiry	Yes No
	(b)	Whether any Civil or Criminal action or inquiry is going on against the applicant as far as his/her knowledge goes. If yes, the details thereof: i) Civil/Criminal ii) Departmental Inquiry	Yes No

8. Gist of ACRs of last 10 years:

Year	Reporting	Reviewing	Accepting
	Authority	Authority	Authority

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge & belief.

(Name & Signature of the Applicant)

STATE PUBLIC SECTOR ENTERPRISES

Year-wise Audited Annual Turnover of the Company for 3 financial years preceding the calendar year in which the post has been advertised.

Year		Annual Turnover of the Company & FY.
	is/was serving	Company w

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge.

(Name & Signature of the Applicant)

PRIVATE SECTOR

Year-wise Audited Annual Turnover of the Company for 3 financial years preceding the calendar year in which the post has been advertised.

Year	Company in which candidate is/was serving	Annual Turnover of the Company & FY.

(i)	The	annual report for the last 3 years :		
	(a)	may be accessed over(Please provide URL), or		
	(b)	enclosed		
(ii)	I ce	rtify that I am		
	(a)	Working at Board level position:	Yes	No
	(b)	Working atleast a post of the level immediately below Board level:	Yes	No
	(c)	Whether the company is listed if yes:	Yes	No
Proo	f of lis	sting may be accessed over(Please prov	vide URL)	
(iii)		-certified copies for proof of age and cational qualifications (enclosed)	,	
(iv)	The relevant jobs handled in the past with			

(iv)	The relevant jobs handled in the past with details/particular references	
. 10	certify that the details furnished by me in Cal-	

I certify that the details furnished by me in Columns 1 to 8 wherever applicable are true to the best of my knowledge& belief.

(Name & Signature of the Applicant)

Declaration

l,have not been disquali	Son/Daughter of	hereby certify that
relevant sections of the	fied to act as a Director under Se Indian Companies Act, 2013.	Section 164 or any other

(Name & Signature of the Applicant)

Verification

(To be filled in by the designated officer for CPSE/Central Government/Armed Forces of the Union/All India Services/SPSE)

It is certified that the particulars furnished above have been scrutinized and found to be correct as per official records.

Signature & Designation of the Competent Authority With Telephone No.& E-mail address