



ASHUGANJ POWER STATION COMPANY LIMITED
(An Enterprise of Bangladesh Power Development Board)

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DEPENDANTS' RECOGNITION FORM

INSTRUCTIONS: 1. The form is to be filled by the permanent employee.					
PERMANENT EMPLOYEE					
Full Name: _____		Employee ID Number: _____			
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Job Title: _____			
Date of Birth (dd/mm/yy): <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Date of Joining: _____			
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Married <input type="checkbox"/> Divorced		Pay Level: _____			
Religion: <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Other		Division/Unit/Section: _____			
SPOUSE					
Full Name: _____		Occupation: _____			
Date of Birth (dd/mm/yy): <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			
Date of Marriage (dd/mm/yy): <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		NID No.: _____			
DEPENDANT CHILDREN (upto 30 years of age)					
Name of the children (in descending order of age)	Gender		Date of Birth	Occupation	Birth Certificate/ NID/Passport No.
	M	F			
1.					
2.					
3.					
4.					
5.					
DEPENDANT PARENTS					
Name	Relation	Date of Birth	Occupation	NID/Passport No.	

[Copy of- Birth certificate/NID/ Passport and Marriage certificate (in case of spouse) of dependent must be enclosed.]

I certify that the statements presented above by me are true and that I WILL NOTIFY HRM DIVISION OF ANY CHANGES IMMEDIATELY in respect of the above declaration.

Signature:
Date: