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	<p>माल और सेवा कर एवं केन्द्रीय उत्पाद शुल्क प्रधान मुख्य आयुक्त कार्यालय Office of the Principal Chief Commissioner of GST & Central Excise तमिलनाडु एवं पुदुच्चेरी, चेन्नई अंचल Tamilnadu & Puducherry, Chennai Zone जी एस टी भवन, सं. 26/1, महात्मा गांधी रोड, चेन्नई – 600 034 GST Bhawan, No.26/1, Mahatma Gandhi Road, Chennai –600 034 ई-मेल / Email: ccaestt-prcco@gov.in/cca.estt.section2@gmail.com दूरभाष / Ph: 28331011 फैक्स / Fax: 044-28331050/1015</p>	
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File No. : GCCO/CCA/RECR/19/2023-CCAESTT-O/o Pr CC-CGST-ZONE-CHENNAI

नोटिस / NOTICE

विषय: कर्मचारी चयन आयोग, मल्टी-टास्किंग (गैर-तकनीकी) कर्मचारी परीक्षा (एमटीएस) 2021 के माध्यम से अभ्यर्थियों का आबंटन - दस्तावेज सत्यापन की तिथि और स्थान की सूचना के संबंध में।

Sub: Allocation of candidates through Staff Selection Commission, Multi-Tasking (Non- Technical) Staff Examination (MTS) 2021 - Intimation of date and venue of Document Verification– Reg.

कर्मचारी चयन आयोग (दक्षिण क्षेत्र), चेन्नई ने पत्र फा.सं. 6/6/2023-एसआर दिनांक 14-04-2023, 21-04-2023 और 27-04-2023 के माध्यम से विभिन्न राज्यों और केंद्र शासित प्रदेशों के लिए मल्टी-टास्किंग (गैर-तकनीकी) स्टाफ परीक्षा, 2021 के परिणामों के आधार पर चेन्नई अंचल में मल्टी-टास्किंग स्टाफ पद के लिए 08 उम्मीदवार आवंटित किए हैं।

The Staff Selection Commission (SR), Chennai vide letter F.No. 6/6/2023-SR dated 14-04-2023, 21-04-2023 & 27-04-2023 has allocated 08 candidates for the post Multi-tasking Staff to Chennai Zone based on the results of Multi-Tasking (Non- Technical) Staff in different States and Union Territories Examination 2021.

2. इस संबंध में अनुलग्नक 'क' में दर्शाए गए अभ्यर्थियों को निदेश दिया जाता है कि वे अपने नामों के आगे दी गई तारीखों पर प्रातः 10.00 बजे माल और सेवा कर एवं केन्द्रीय उत्पाद शुल्क के प्रधान मुख्य आयुक्त कार्यालय, चेन्नई, 26/1, महात्मा गांधी मार्ग, नुंगम्बाक्कम, चेन्नई - 600 034 में दस्तावेज सत्यापन के लिए निश्चित रूप से उपस्थित हों। अभ्यर्थियों को सलाह दी जाती है कि वे दस्तावेज सत्यापन और चिकित्सा परीक्षा को पूरा करने के लिए कम से कम 02 कार्य दिवसों के लिए अपने यात्रा कार्यक्रम की योजना बनाएं। दस्तावेज सत्यापन की प्रक्रिया संवर्ग नियंत्रण प्राधिकारी, चेन्नई अंचल द्वारा डोजियर की प्राप्ति और सत्यापन के अध्यधीन है।

In this regard, the candidates figuring in Annexure 'A' are directed to report for Document Verification on the dates mentioned against their names at 10.00 A.M at Office of the Principal Chief Commissioner of GST & Central Excise, 26/1, Mahatma Gandhi Road, Nungambakkam, Chennai - 600 034 without fail. Candidates are advised to plan their itinerary for at least 02 working days so as to complete Document Verification and Medical Examination. The process of Document Verification is subject to receipt and verification of dossiers by the Cadre Controlling Authority, Chennai zone.

3. अनुप्रमाणन प्रपत्र, तीन प्रतियों में विधिवत् भर कर (केवल हस्तलिखित) दस्तावेज सत्यापन के समय निश्चित रूप से प्रस्तुत किया जाए।

The Attestation Form, in triplicate (3 copies), may be duly filled in all respects (by hand only) and produced at the time of document verification without fail.

4. अभ्यर्थियों को निर्देश दिया जाता है कि वे दस्तावेज सत्यापन के समय निम्नलिखित दस्तावेज (मूल प्रति), एक सेट छायाप्रति के साथ अवश्य लाएं:

The candidates should bring the following documents (in original) along with 1 set of photocopy at the time of Document Verification:

क) जन्म तिथि दर्शाते हुए मैट्रिक / हाई स्कूल प्रमाण पत्र।

a) Matriculation / High School Certificate showing Date of Birth.

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ख) शैक्षिक योग्यता के समर्थन में शैक्षणिक प्रमाण पत्र।

b) Academic Certificates in support of Educational Qualification.

ग) छायाप्रतियों के साथ निर्धारित प्रपत्र में अनुसूचित जाति / अनुसूचित जनजाति / अन्य पिछड़ा वर्ग के मामले में मूल जाति / समुदाय प्रमाण पत्र (निर्णायक तिथि कर्मचारी चयन आयोग की अधिसूचना के अनुसार) ।

c) Original Caste / Community Certificate in case of SC/ST/OBC in the prescribed form along with the photocopies. (Crucial date as per SSC Notification)

घ) ई.डब्ल्यू.एस अभ्यर्थी के मामले में आय और संपत्ति प्रमाण पत्र (निर्णायक तिथि कर्मचारी चयन आयोग की अधिसूचना के अनुसार) ।

d) Income and Asset Certificate in case of EWS candidate. (Crucial date as per SSC Notification)

ङ) विकलांग व्यक्ति (दिव्यांगजन) अभ्यर्थी के मामले में प्रमाण पत्र ।

e) Certificate in case of Person with Disabilities (Divyangjan) candidate.

च) केन्द्र या राज्य सरकार के दो राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से चरित्र प्रमाण पत्र (न्यूनतम दो वर्षों के लिए) । (मूल में 3 सेट)

f) Character Certificate (for minimum 2 Years) from two Gazetted officers of the Central or State Government or Stipendiary Magistrates. (3 sets in original)

छ) केन्द्र या राज्य सरकार के राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से पहचान प्रमाण पत्र (न्यूनतम दो वर्षों के लिए) । (मूल में 3 सेट)

g) Identity Certificate (for minimum 2 Years) from a Gazetted officers of the Central or State Government or Stipendiary Magistrates. (3 sets in original)

ज) स्वस्थता प्रमाण पत्र उस चिकित्सक से प्राप्त किया जाना है जो सिविल सर्जन के रैंक से नीचे न हो । महिला उम्मीदवारों को प्रमाण पत्र महिला चिकित्सक से प्राप्त किया जाना है जो सिविल सर्जन के रैंक से नीचे न हो । (अनुलग्नक 'ख')

h) Certificate of Fitness from a physician not below the rank of a Civil Surgeon. Female candidates should get the certificate from a female physician not below the rank of a Civil Surgeon. (Annexure 'B')

झ) वर्तमान में केन्द्र सरकार / राज्य सरकार, स्वायत्त निकाय और सार्वजनिक क्षेत्र के उपक्रम के तहत किसी भी कार्यालय में कार्यरत होने की स्थिति में पिछले नियोक्ता से सेवा-मुक्ति प्रमाण पत्र । इस नोटिस के संदर्भ में प्रमाण पत्र प्राप्त किया जाना है ।

i) Discharge Certificate from previous employer in case the candidate is employed in any of the offices under the Central Government / State Government, Autonomous Body, and Public Sector Undertaking presently. The certificate should be obtained with reference to this notice.

ञ) भूतपूर्व सैनिकों के मामले में सेवा-मुक्ति प्रमाण पत्र।

j) Discharge Certificate in case of Ex-Servicemen.

ट) आधार कार्ड और पैन कार्ड।

k) Aadhaar card and PAN Card.

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- ठ) 5 से.मी x 7 से.मी आकार की रंगीन तस्वीरों की 3 सेट अनुप्रमाणन प्रपत्रों पर चिपकाए जाने हैं ।
 1) **3 Sets of Color photographs of size 5cm x 7cm** to be pasted on the Attestation Forms.

5. दस्तावेज़ सत्यापन के लिए निर्धारित तिथि को उपस्थित नहीं होने की स्थिति में ऐसा माना जाएगा कि अभ्यर्थी विभाग में नियुक्ति का इच्छुक नहीं है तथा उसके नामांकन को निरस्त किया जाएगा ।

In the event of not reporting on the prescribed date for the Document Verification, it will be presumed that you are not interested in accepting the offer of appointment in the department and your nomination will be treated as cancelled.

6. अभ्यर्थियों को पंजीकृत डाक और ई-मेल द्वारा सूचना अलग से भेजी जा रही है । सूचना पत्रों की प्रेषित प्रतियां प्राप्त न होने की स्थिति में भी अभ्यर्थी अपने नाम के सामने उल्लिखित तिथियों पर दस्तावेज़ सत्यापन में शामिल हों । अभ्यर्थी संलग्न सत्यापन प्रपत्र डाउनलोड करें एवं दस्तावेज़ सत्यापन में भाग लेने के समय विधिवत भरे हुए प्रपत्र प्रस्तुत करें । इस नोटिस के साथ सभी प्रपत्र <https://gstchennai.gov.in/promotion-posting-transfer.php> से डाउनलोड किए जा सकते हैं ।

Separate intimation to the candidates is being dispatched by Registered Post & Email. The candidates may attend the document verification on the dates mentioned against their names even in case they do not receive the dispatched copies of information letters. The candidates may download the enclosed attestation forms and submit the duly filled in forms at the time of attending document verification. All forms along with this Notice may be downloaded from - <https://gstchennai.gov.in/promotion-posting-transfer.php>

Signed by D Jayapriya

(डी. जयप्रिया / D. JAYAPRIYA) Date: 10-05-2023 12:35:28

अपर आयुक्त / ADDITIONAL COMMISSIONER (प्र.मु.आ.का. / PCCO)

सेवा में / To

अभ्यर्थियों को (अलग्नक 'क' पर दी गई सूची के अनुसार)

The candidates (As per the list enclosed as Annexure 'A')

संलग्न / Encl:

1. अनुलग्नक 'क' / Annexure 'A'
2. अनुलग्नक 'ख' / Annexure 'B'
3. अनुप्रमाणन प्रपत्र / Attestation Form
4. चरित्र प्रमाण पत्र / Character Certificate
5. पहचान प्रमाण पत्र / Identity Certificate
6. वैवाहिक स्थिति प्रमाण पत्र / Marital Status Certificate

सभी प्रपत्र एवं संलग्नक चेन्नई केन्द्रीय उत्पाद शुल्क की वेबसाइट - <https://gstchennai.gov.in/promotion-posting-transfer.php> से डाउनलोड किए जा सकते हैं ।

All forms & enclosures can be downloaded from Chennai Central Excise Website - <https://gstchennai.gov.in/promotion-posting-transfer.php>

प्रतिलिपि/ Copy to:

अधीक्षक (कंप्यूटर अनुभाग), प्र.मु.आ. कार्यालय, चेन्नई वेबसाइट पर प्रदर्शित करने हेतु ।

The Superintendent (Computer Section), Pr.CCO for displaying on the website.

ANNEXURE - A

SL. NO	ROLL NO	RANK	NAME	DATE FOR DOCUMENT VERIFICATION
1	8201011381	302	KAMARAJ K	17-05-2023
2	4410021908	1274	SUBHASISH GIRI	
3	9001001865	1514	PRIYANKA BHATT	
4	8208001027	1551	MANIKANDAN V	
5	2405092616	1481	KAPIL SHARMA	
6	2201122116	1781	SANTU BAIRAGI	
7	2405088309	5989	DILIP SINGH MEENA	
8	3010326277	2263	RAGHVENDR SINGH	

ANNEXURE – B

PRO FORMA-I

(A) Candidate's Statement/Declaration

The candidate must make the statement required below prior to his/her medical examination and must sign the Declaration appended thereto.

1. State your name in full (in block letter)

State your age and birth place.....

2.(a) Do you belong to Scheduled Tribe or to races such as Gorkhas, Garhwalis, Assamese, Nagaland Tribes, etc., whose average height is distinctly lower.

[Answer 'Yes' or 'No', and if the answer is 'Yes' state the name of the race.]

3.(a) Have you ever had small-pox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis?

OR

(b) Any other disease or accident requiring confinement to bed and medical or surgical treatment?

4. When were you last vaccinated?

5. Have you suffered from any form of nervousness due to overwork or any other cause?

6. Furnish the following particulars concerning your family:

Father's age if living and state of Health	Father's age at death & cause of death	Number of Brothers living, their ages & state of health	Number of Brothers dead, their age and cause of death

7. Have you been examined by a Medical Board before?

8. If answer to the above is yes. please state what Service/ Services you were examined for?

9. Who was the examining authority?

10. When and where was the Medical Board held?

11. Result of the Medical Board's Examination, if communicated to you or if known.

12. All the above answers are to the best of my knowledge belief, true and correct and I shall be liable for action under law for any material infirmity in the information furnished by me or suppression of relevant material information. The furnishing of false information or suppression of any factual information would be a disqualification and is likely to render the candidate unfit for employment under the Government. If the fact that false information has been furnished or that there has been suppression of any factual information comes to notice at any time during the service of a person, his services would be liable to be terminated.

Candidate's signature

Signed in my presence

Signature of the Chairman of the Board

Report of the Medical Board on

(Name of the Candidate)

PHYSICAL EXAMINATION

1. General Development: Good..... Fair Poor.....

Nutrition: Thin..... Average.....Obese.....

Height (without shoes) Weight.....

Any recent change in weight?

Temperature

Girth of Chest: -

(a) (After full inspiration)

(b) (After full expiration)

2. Skin: Any obvious disease

3. Eyes: (1) Any disease

(2) Night Blindness

(3) Defect in colour vision

(4) Field of vision

(5) Visual Acuity

(6) Fundus examination

Acuity of Vision		Naked Eye	With Glasses	Strength of Glasses		
				Sp.	Cyl.	Axis
Distant Vision	R.E.					
	L.E.					
Near Vision	R.E.					
	L.E.					

Hypermetropia (Manifest)

R.E.

L.E.

4. Ears: Inspection Hearing Right Ear

Left Ear

5. Glands Thyroid

6. Condition of teeth

7. Respiratory System: Does physical examination reveal anything abnormal in the respiratory organs? If yes, explain fully.

CIRCULATORY SYSTEM

8. (a) Heart: Any organic lesions?

Rate Standing

After hopping 25 times

2 minutes after hopping

(b) Blood pressure: Systolic Diastolic

9. Abdomen: Girth..... Tenderness Hernia

(a) Palpable: Liver Spleen Kidneys Tumors.....

(b) Haemorrhoids Fistula

10. Nervous system: Indications of nervous or mental disability

11. Locomotor System: Any abnormality.

12.

Genito Urinary System	Any evidence of hydrocele varicocele, etc.
(a) Physical appearance.....	
(b) Sp. Gr.....	
(c) Albumin.....	
(d) Sugar.....	
(e) Casts.....	
(f) Cells.....	

13. Is there anything in the health of the candidate likely to render him/her unfit for the efficient discharge of his/her duties in the service for which he/she is a candidate?

NOTE. In the case of female candidate: If it is found that she is pregnant of 12 weeks standing or over, she should be declared temporarily unfit, vide Regulations 9.

14. (i) State the Services for which the candidate has been examined.

- (a) Indian Administrative Service and Indian Foreign Service.
- (b) Indian Police Service and Delhi and Andaman and Nicobar Islands Police Service.
- (c) Central Services, Groups A and B.

(ii) Has he/she been found qualified in all respects for the efficient and continuous discharge of his/her duties in.

- (a) Indian Administrative Service and Foreign Service.
- (b) IPS and Delhi and Andaman and Nicobar Islands Police Service (see especially height, chest, girth, eye sight, colour blindness and locomotive system).
- (c) Indian Railway Traffic Service (see especially height, chest, eye sight, colour blindness).
- (d) Other Central Services, Groups 'A' and 'B'.

(iii) Is the candidate fit for Field Service.

NOTE. (I) The Board should record their findings under one of the following three categories:

- (i) Fit
- (ii) Unfit on account of
- (iii) Temporarily unfit on account of

NOTE (II) The candidate has not undergone chest X-ray test. In view of this, the above findings are not final and are subject to the report on chest X-ray test.

Place:

Date:

Chairman

Member

Signature

Member

Seal of the Medical Board

PRO FORMA -II

Candidates's Statement/ Declaration

1. State your Name:
(in block letters)
2. Roll No.:

Candidate's Signature

Signed in my presence

Signature of the Chairman of the Board

To be filled in by the Medical Board

NOTE. - The Board should record their findings under one of the following three categories in respect of Chest X-ray test of the Candidate.

Name of the Candidate.....

- (i) Fit
- (ii) Unfit on account of
- (iii) Temporarily unfit on account of

Place:

Date:

Chairman

Member

Signature

Member

Seal of the Medical Board

ATTESTATION FORM

<div style="border: 1px solid black; padding: 10px; text-align: center;"> Affix signed passport size (5cms X 7 cms) approx copy of recent photograph </div>		“WARNING”	
		1	The furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification, and is likely to render the candidate unfit for employment under the Government.
		2	If detained, arrested, prosecuted, bound down, fines convicted, debarred, acquitted etc., subsequent to the completion and submission of this form, the details should be communicated immediately to the authorities to whom the Attestation Form has been sent earlier, failing which, it will be deemed to be suppression of factual information.
		3	If the fact that false information has been furnished or that there has been suppression of any factual information in the Attestation Form comes to notice at any time during the service of a person, his/her services would be liable to be terminated.
1	Name in full (in block capitals) with aliases, if any, (Please indicate if you have added or dropped in any stage, any part of your name or surname)	Surname	Name
2	Present Address in full (i.e. Village, Thana and District, or House No., Lane/Street/Road & Town):		
3(a)	Home Address in full (i.e. Village, Thana and District, or House Number, Lane/Street/ Road and Town and name of District Headquarters)		
(b)	If originally a resident of Pakistan / Bangladesh (erstwhile East Pakistan) the address in that country and the date of migration to Indian Union.		
4	Adhaar Card No. (if available)		
5	PAN No. (if available)		
6	Nationality		
7.(a)	Date of Birth		
(b)	Present Age		
(c)	Age at Matriculation		
8. (a)	Place of birth, district and state in which situated		

(b)	District and State to which you belong					
(c)	District and State to which your father originally belong					
9.(a)	Your Religion					
(b)	Are you a member of a Scheduled Caste /Scheduled Tribe/ Other Backward Classes ? (Answer Yes/No)					
10	Particulars of places (with periods of residences) where you have resided for more than one year at a time during the preceding five years. In case of stay abroad (including Pakistan), particulars of all places where you have resided for more than one year after the age of 21 years should be given:					
From	To	Residential address in full (i.e. Village, Thana and District, or House No., Lane/Street/Road & Town)		Name of the District Headquarters of the place mentioned in the preceding Column.		
11.	Name (in full & aliases if any)	Nationality (by birth or domicile)	Place of birth	Occupation, if employed, give designation and official address	Present postal address (if dead, give last address)	Permanent Home address
a)Father						
b)Mother						
c)Spouse						

12.	Information to be furnished with regard to son(s) and/or daughter(s), in case they are studying/living in a Foreign Country:			
Name	Nationality (by birth or by domicile)	Place of birth	Country in which studying/living with full address	Date from which studying/ living in the country mentioned in the previous column
13.	Educational Qualification showing places of education with years in Schools and Colleges since 15 th year of age.			
Name of School/ College with Full Address		Date of entering	Date of leaving	Examination passed
14. (a)	Are you holding or have any time held an appointment under Central or State Government or a Semi-Government or a Quasi Government body or an autonomous body or a Public Sector Undertaking or a private firm or Institution? If so, give full particulars with date of employment up-to-date			
Period		Designation and Emoluments and nature of Employment	Full Name and Address of Employer	Reasons for leaving previous service
From	To			
14.(b)	<p>If the previous employment was under the Government of India/State Government/ Undertaking owned or controlled by the Government of India or a State Government/an autonomous body/University/Local Body.</p> <p>If you have left service on giving a month's notice under Rule 5 of CCS (Temporary Service) Rules 1965, or any similar corresponding rules, where any disciplinary proceedings framed against you, or had you been called upon to explain your conduct in any matter at the time you gave notice to termination of service, or at a subsequent date(s), before your service actually terminated?</p>			

15. (i)	(a)	Have you ever been kept under detention?	Yes/No
	(b)	Have you ever been arrested?	Yes/No
	(c)	Have you ever been prosecuted? (i.e. has a charge sheet in a criminal case been filed against you in any court of law)	Yes/No
	(d)	Is any original case pending against you in any Court of Law at the time of filling up this Attestation Form?	Yes/No
	(e)	Have you ever been convicted by a Court of Law for any offence?	Yes/No
	(f)	Whether discharged/expelled/withdrawn from any training/institution under the Govt. or otherwise.	Yes/No
	(g)	Have you ever been rusticated by any University or any other educational authority/ institution.	Yes/No
	(h)	Have you ever been debarred / disqualified by any Public Service Commission/ Staff Selection Commission for any of its examinations/selections?	Yes/No
(ii)		If the answer to any of the above mentioned is 'YES', give full particulars of the case/arrest/detention/fine/conviction sentence/punishment etc., and/or the nature of the case pending in the Court/University/Educational Authority etc., at the time of filling up this attestation form	
Notes:	(i)	Please also see the 'WARNING' at the top of this attestation form.	
	(ii)	Specific answers to each of the questions should be given by striking out 'YES' or 'NO' as the case may be.	
16.	Names of two responsible persons of your locality or two references to whom you are known with Designation, full Address and Mobile/Landline no.)	1)	
		2)	
DECLARATION			
<p>I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am fully aware that by providing false information or suppressing material information while filling this form, the authorities have full right to terminate my appointment letter and I am also liable for appropriate criminal/civil/legal action as a consequence.</p> <p>I am not aware of any circumstances which might impair my fitness for employment under Government.</p> <p>Place:</p> <p>Date:</p> <p style="text-align: right;">Signature of the candidate</p>			

The Attestation Form should be complete in all respects. Incomplete forms will be summarily rejected.

CHARACTER CERTIFICATE

Certified that I have known Shri / Smt. _____
son / wife / daughter of _____ for the last
_____ years / months and that to the best of my knowledge and belief he / she
bears reputable character and has no antecedent which render him / her unsuitable
for Government employment.

Shri / Smt. _____ is not
related to me.

Date:

Signature:

Place:

Designation:

CHARACTER CERTIFICATE

Certified that I have known Shri / Smt. _____
son / wife / daughter of _____ for the last
_____ years / months and that to the best of my knowledge and belief he / she
bears reputable character and has no antecedent which render him / her unsuitable
for Government employment.

Shri / Smt. _____ is not
related to me.

Date:

Signature:

Place:

Designation:

IDENTITY CERTIFICATE

CETIFICATE TO BE SIGNED BY ONE OF THE FOLLOWING:-

- i) Gazetted Officers of Central of State Government.
- ii) Members of Parliament or State Legislature belonging to the Constituency where the candidate or his parent/guardian is ordinarily resident:
- iii) Sub-Divisional Magistrate/Officers
- iv) Tahsildars or Naib/Deputy Tahsildars authorized to exercise Magisterial powers;
- v) Principal/Headmaster of the recognised School/College/Institution where the candidate studied last.
- vi) Block Development Officers vii) Post Masters viii) Panchayat Inspectors

Certified that I have known Shri./Smt/Kum. _____

son/daughter of Shri. _____ for the past _____ years and _____ months and that to the best of my knowledge and belief the particulars furnished by him/her are correct.

PLACE:

SIGNATURE

DATE:

Designation or Status & Address

TO BE FILLED BY THE OFFICE

- i) Name, Designation and Full Address of the appointing authority
- ii) Post for which the candidate is being considered

FORM OF DECLARATION (APPLICABLE TO BOTH SEXES)

Shri / Smt. / Kumari _____ declares:

- i) That I am unmarried / a widower / a widow.
- ii) That I am married and have only one spouse living.
- iii) That I have entered into and contracted a marriage with another person having a living spouse. Application for grant of exemption is enclosed.
- iv) That I have entered into and contracted a marriage with another person during the life time of my spouse. Application for grant of exemption is enclosed.

I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date:

Signature

NOTE: Please delete clause / clauses not applicable.

* applicable in the case of clause (i), (ii) & (iii) only.

Application for grant of exemption (vide Para 1 (iii) & (iv) of the declaration)

To,

Sir / Madam,

I request that in view of the reasons stated below, I may be granted exemption from the operation of restriction on the recruitment to service of a person having more than one wife living / wife who is married to a person already having one or more living.

Yours faithfully,

Signature