

#### माल और सेवा कर एवं केन्द्रीय उत्पाद शुल्क प्रधान मुख्य आयुक्त कार्यालय

Office of the Principal Chief Commissioner of GST & Central Excise तमिलनाडु एवं पुदच्चेरी, 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.section@gmail.com दूरभाष / Ph: 28331011 फैक्स / Fax: 044-28331050/1015



GCCO/CCA/RECR/34/2023-CCAESTT-O/o Pr CC-CGST-ZONE-CHENNAI-Part(1)

## स्चना / NOTICE

विषय: **दूसरा मौका** - कर्मचारी चयन आयोग, संयुक्त स्नातक स्तरीय परीक्षा, 2021 के माध्यम से निरीक्षक (वस्तु और सेवा कर तथा केन्द्रीय उत्पाद शुल्क) के पद के लिए अभ्यर्थियों का आबंटन-दस्तावेज़ सत्यापन/शारीरिक क्षमता परीक्षा के स्थान और तिथि की सूचना- संबंधित।

Sub: **2**<sup>nd</sup> **Chance** - Allocation of Inspectors (GST & Central Excise) recommended for appointment by the SSC on the basis of result of Combined Graduate Level Examination, 2021 – Call letter for Documents Verification/ Physical Endurance Test - Reg.

Ref: This Office letter even no. dated 21.08.2023 and letter No. GCCO/CCA/RECR/22/2023-CCAESTT-O/o Pr CC-CGST-ZONE-CHENNAI dated 25.08.2023.

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The following candidates recommended by the Staff Selection Commissioner for appointment to the post of Inspector in Tamil Nadu & Puducherry Zone who were directed to report for verification of Documents/ Physical Endurance Test on 07.08.2023, 08.08.2023 and 09.08.2023, have not appeared for the same.

For the post of Inspector:

SI. NO.	ROLL NO	RANK	NAME OF THE CANDIDATE	DATE OF BIRTH
1	3009048968	31296	BHARAT GAUR	25.12.1986
2	4205004292	31278	RAHUL KUMAR	20.02.1992
3	2201151925	26675	UMED	15.08.1993
4	4604029634	25782	MONISH GAUTAM	12.08.1996
5	2405066862	22625	SITARAM MEENA	01.04.1992
6	4410103918	22046	AMIT MEENA	26.06.2000
7	2201326532	21959	DHEERAJ KUMAR MEENA	15.08.1999
8	2405041044	21821	VIDISHA KUMPAWAT	22.09.1997
9	7204011461	21414	SOURAV	29.09.1994
10	2201256319	16176	JAY VIKRANT	01.09.2000
11	7205023402	15818	INGLE ADARSH RAJESH	11.12.1995
12	2006018298	15795	ANKIT KUMAR	22.07.1994
13	7001011153	15445	PARMAR AJAY PATHUBHAI	21.05.1993
14	4415001964	15401	PRABHAKAR MANDAL	1.05.1996

023 15	8601021666	651	MIRYALA AKSHARA	29.11.1996
16	7002005616	8231	AHIR SAGAR JOHN	29.11.1987
17	3009092545	5943	PRAGATI PORWAL	6.05.1997
18	2201219396	5932	ANSHU KUMAR ANAND	23.06.1997
19	7204035634	5861	ABHAY SINGH	10.08.1999
20	2201031979	5776	ARUN KUMAR	10.06.1993
21	2201069326	5729	SHANU KUMAR	27.03.1998
22	3013092998	4987	AKANKSHA KUMARI	13.01.2000
23	3206149624	4573	AMIT KUMAR	6.10.1995
24	8006012639	4472	NARRAVULA HAREESH KULAKARNI	5.05.1996
25	2201205792	4113	ABHISHEK SINGH SARAWAG	11.05.1996
26	2406027857	4013	MANOJ KUMAR KUMAWAT	25.05.2001
27	2201170431	3449	ASHISH PAL	21.04.1997
28	5301000820	3284	RISHABH PRADHAN	21.07.1997
29	2201173378	3188	KUSH BAGHLA	29.07.1992
30	8201036452	3167	NUPUR PATI	7.07.1992
31	3010049016	3154	AZAD SINGH	14.08.1998
32	2401025643	3121	KARTIKEY AGRAWAL	15.04.2000
33	7002004197	3011	PURAN SINGH	18.08.1992
34	2209004017	3005	NARAYANAN NAMBOOTHIRI 17.02.199	
35	9210000144	2997	ANANTH VEMURI	16.07.1992
36	9001008144	2638	ASHWIN NANDAL	4.02.1998
37	3009061656	2424	RAUNAK SHARMA	20.03.1996

# For the post of Executive Assistant:

SI. NO.	ROLL NO	RANK	NAME OF THE CANDIDATE	DATE OF BIRTH
1	2201021467	3292	UPKAR SHARMA	24-04-1993
2	2405012787	3375	NIKHIL SHARMA	19-10-1999
3	2201126723	3591	KAJAL RANI	11-05-1995
4	6007025724	3600	SHAILENDRA KUMAR GUPTA	16-06-1995
5	7204011533	4948	KUNDRAPU MARAYYA NAIDU	24-08-1995
6	2201026808	4979	SONU KUMAR YADAV	20-11-1991
7	3209012512	4981	ACHYUT SHARMA	1-02-1999
8	2201069597	4996	SWATI	8-01-1994
9	3001000748	17102	VIKAS	13-04-2001
10	2201042287	23616	DIKSHIKA MEENA	20-04-1993
11	3009049156	31961	PRAFULLA TRIPATHI	13-01-1998

For the post of Tax Assistant:

SI. NO.	ROLL NO	RANK	NAME OF THE CANDIDATE	DATE OF BIRTH
1	8012000457	32169	HARI BABU MUDDADA	28/01/1982
2	8601049607	27118	BANOTH KAMAL NAIK	26/05/1996
3	2405006957	27103	VIMLESH KUMAR MEENA	25/07/1993
4	2405028727	27101	HARSH PABRI	9/4/2002
5	2201260035	25523	MANISHA RAWAT	25/04/2000
6	4410097286	24675	DARPAN MONDAL	3/5/1997
7	8601027670	24667	NAKKA RANJITH KUMAR	19/05/1992
8	4417010239	24649	DIWAKAR KUMAR	6/4/1995
9	2406010929	11438	CHHAVI PRAKASH	2/7/1992
10	4410086361	11434	SAURAV KUMAR	17/12/1995
11	2006009574	11433	SHUBHAM SAINI	5/12/1996
12	2006011911	11354	HARIOM	2/5/2000
13	3010016424	11178	AMAN KUMAR	14/08/1997
14	8004001571	11023	AMBATI KEERTHI NAIDU	28/09/1999
15	3206114050	10991	RAM KRISHAN MISHRA	2/10/1997
16	2209016599	8990	PARVINDER SINGH	1/7/1999
17	4410061161	8939	DEV KRISHNA ROY	12/7/2001
18	2201208977	8876	ARJUN SINGH PARMAR	11/4/1999
19	4410083448	8841	SHRAMANA BHATTACHARYA	15/11/1995
20	2201066037	8839	DIVYA SINGH	20/08/2000
21	4410085208	8503	POULAMI SARKAR	2/12/1995
22	8603006963	8415	GANDLURU REDDEPPA REDDY	17/05/1995

2. इस संबंध में, ऊपर दर्शाए गए अभ्यर्थियों को रिपोर्ट करने का दूसरा और तीसरा मौका दिया जाता है और ऊपर दर्शाए गए अभ्यर्थियों को निदेश दिया जाता है कि वे 25.09.2023 पर प्रातः 10.00 बजे वस्तु और सेवा कर तथा केन्द्रीय उत्पाद शुल्क के प्रधान मुख्य आयुक्त का कार्यालय, चेन्नई अंचल, 26/1, महात्मा गांधी मार्ग, नुंगम्बाक्कम, चेन्नई - 600 034 में दस्तावेज़ सत्यापन/शारीरिक क्षमता परीक्षा के लिए बिना किसी चूक के उपस्थित हों। अभ्यर्थियों से अनुरोध किया जाता है कि वे दस्तावेज़ सत्यापन/शारीरिक क्षमता परीक्षा के लिए जूते अपने साथ लाएं।

In this regard, the Candidates are given a <u>second chance on 25.09.2023 at 10.00 A.M</u> to report 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 2 days so as to attend DV and PET. <u>Candidates are requested to bring shoes for the Physical Test.</u>

3. अनुप्रमाणन प्रपत्र विधिवत् भर कर दस्तावेज़ सत्यापन/शारीरिक क्षमता परीक्षा के समय तीन प्रतियों में बिना किसी चूक के अधोहस्ताक्षरी को प्रस्तुत किए जाने चाहिए।

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

4. अभ्यर्थियों को निर्देश दिया जाता है कि वे दस्तावेज़ सत्यापन/शारीरिक क्षमता परीक्षा के समय निम्नलिखित दस्तावेज़ तिन प्रतियों के साथ अवश्य प्रस्तुत करें:

The candidates should bring the following documents (<u>in original</u>) along with 1 set of photocopy at the time of Document Verification/ Physical Test:

- क) जन्म तिथि दर्शाते हुए मैट्रिक / हाई स्कूल प्रमाण पत्र ।
- a) Matriculation / High School Certificate showing Date of Birth.
- 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 / सम्दाय प्रमाण पत्र ।
- c) Original Caste/ Community Certificate in case of SC/ST/OBC in the prescribed form along with the photocopies.
- घ) विकलांग व्यक्ति (दिव्यांगजन) अभ्यर्थी के मामले में प्रमाण पत्र ।
- d) Certificate in case of Person with disabilities (Divyangjan) candidate.
- ड) ई.डब्ल्यू.एस अभ्यर्थी के मामले में आय और संपत्ति प्रमाण पत्र।
- e) Income and Assets Certificate for EWS Category Candidate.
- च) केन्द्र या राज्य सरकार के दो राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से चरित्र प्रमाण पत्र । (मूल में 3 सेट)
- f) Character Certificate from <u>two Gazetted</u> officers of the Central or State Government or Stipendiary Magistrates. (<u>3 sets in original for minimum 2 years</u>)
- छ) केन्द्र या राज्य सरकार के राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से पहचान प्रमाण पत्र। (मूल में 3 सेट)
- g) Identity Certificate from <u>a Gazetted</u> officer of the Central or State Government or Stipendiary Magistrates. (<u>3 sets in original for minimum 2 years</u>)
- ज) स्वस्थता प्रमाण पत्र उस चिकित्सक से प्राप्त किया जाना है जो सिविल सर्जन के पद से नीचे न हो । महिला उम्मीदवारों को प्रमाण पत्र महिला चिकित्सक प्राप्त किया जाना है जो सिविल सर्जन के पद से नीचे न हो । (अन्लग्नक '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 'A')
- 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/ NOC to attend DV 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) Aadhar card and PAN Card.
- ठ) 5 से.मी  $\times$  7 से.मी आकार की रंगीन तस्वीरों की 3 सेट अनुप्रमाणन प्रपत्रों पर चिपकाए जाने हैं ।

1/1546271/2023 3 Sets of Colour photographs of size 5cm x 7cm to be pasted on the Attestation Forms.

6. वैसे अभ्यर्थी जो पहले से समान मन्त्रालय/विभाग में समान श्रेणी (निरीक्षक सिजिएसटी, निवारक अधिकारी, परीक्षक) में कार्यरत हैं और शारीरिक परीक्षा से छुट चाहतें हैं वे अपने वर्तमान नियोजक से इस शारीरिक परीक्षा उतिर्नता के सम्बन्ध में प्रमाणपत्र प्रस्तुत करें। प्रमाणपत्र इस सूचना के संदर्भ में प्राप्त किया जाना चाहिए।

Candidates who are already working in the same Ministry/Department at similar post (Inspector CGST, PO, Examiner) and want to avail exemption from the Physical Test, should produce a certificate from the current employer regarding passing the Physical Test. Certificate should be obtained with reference to this Notice.

7. दस्तावेज़ सत्यापन/शारीरिक परीक्षा के लिए निर्धारित तिथि को उपस्थित नहीं होने की स्थिति में ऐसा माना जाएगा की अभ्यर्थी विभाग में नियुक्ति का इच्छुक नहीं है तथा उसके आवंटन को निरस्त किया जाएगा।

In the event of not reporting on the prescribed date for the Document Verification/Physical Test, 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.

8. अभ्यर्थियों के लिए स्पीड पोस्ट द्वारा अलग से सूचना भेजी जा रही है। भेजे गए सूचना पत्रों के न मिलने पर भी अभ्यर्थी उनके नामों के आगे दी गई तारीखों पर शारीरिक मानक/परीक्षा के लिए उपस्थित हो सकते हैं। अभ्यर्थी संलगन सत्यापन प्रपत्रों को डाउनलोड कर सकते हैं और विधिवत् भरे गए प्रपत्रों को शारीरिक क्षमता परीक्षा में उपस्थित होने के समय प्रस्तुत कर सकते हैं।

Separate intimation to the candidates is being dispatched by Registered Post & Email. The candidates may attend the physical standard/ tests on the dates mentioned above 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 physical tests. All forms along with this Notice may be downloaded from <a href="https://gstchennai.gov.in/promotion-posting-transfer.php">https://gstchennai.gov.in/promotion-posting-transfer.php</a>.

9. अपरिहार्य परिस्थितियों में दस्तावेज़ सत्यापन/शारीरिक परीक्षा की तिथियों में बदलाव किया जा सकता है। अतः अभ्यर्थियों को सलाह दिया जाता है के वे चेन्नई केन्द्रीय उत्पाद शुल्क की वेबसाइट व अपने ईमेल को नियमित रूप से देखते रहें।

In the event of unavoidable circumstances, the Document Verification/ Physical Test may be postponed/ rescheduled. Accordingly, candidates are advised to keep checking the website of Chennai Central Excise and their individual email.

Signed by
Jayapriya Dharanipathi
(**D.JAYAPRIY** के ही नुस्**प्रिम्म** 23 12:06:30 **ADDITIONAL COMMISSIONER (PR. CCO)**अपर आयक्तु (पी.आर. सी.सी.ओ)

# l/1546271/2033 में /To

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

The candidates.

#### संलग्न / Encl:

- 1. अनुलग्नक 'क' / Annexure 'A' (Medical Certificate)
- 2. अनुप्रमाणन प्रपत्र / Attestation Form
- 3. चरित्र प्रमाण पत्र / Character Certificate
- 4. पहचान प्रमाण पत्र / Identity Certificate
- 5. वैवाहिक स्थिति प्रमाण पत्र / Marital Status Certificate
- 6. ओबीसी घोषणा की स्थित //OBC Declaration Status

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 - <a href="https://gstchennai.gov.in/promotion-posting-transfer.php">https://gstchennai.gov.in/promotion-posting-transfer.php</a>

#### प्रतिलिपि / Copy to:

अधीक्षक (कंप्यूटर अनुभाग), प्र० मु० आ० कार्यालय, चेन्नई वेबसाइट पर प्रदर्शित करने हेत् ।

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

## 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 f	State your name in full (in block letter)						
State your age	and birth pla	ace					
Nagaland Tribes, etc., w	2.(a) Do you belong to Scheduled Tribe or to races such as Gorkhas, Garhawalis, 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.]						
•	small-pox, intermittent of asthma, heart disease	e, lung disease, fainting					
	Ol						
(b) Any other disease or	accident requiring confin	nement to bed and medica	al or surgical treatment?				
4. When were you last va	accinated?						
5. Have you suffered fro	m any form of nervousne	ess due to overwork or an	ny other cause?				
6. Furnish the following	particulars concerning ye	our 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 examin	ned by a Civil Surgeon /C	CMO for Medical before	?				
8. If answer to the above	is yes. please state what	Service/ Services you w	ere examined for?				
9. Who was the examining	ng authority?						
10. When and where was	s the Medical held?						
11. Result of the Medical Examination, if communicated to you or if known.							
liable for action under suppression of relevant of of any factual information for employment under the there has been suppress	rs are to the best of my kelaw for any material information. The on would be a disqualificate Government. If the faction of any factual information would be liable to	firmity in the information of false information and is likely to rest that false information has mation comes to notice	on furnished by me or ormation or suppression ander the candidate unfit as been furnished or that at any time during the				
			Candidate's signature				

Signed in my presence Signature of the CMO/Civil Surgeon Report of the Medical on .....

## (Name of the Candidate)

## PHYSICAL EXAMINATION

1. General Develo	opment: (	Good	Fair	Poor		
Nutrition: Thin AverageObese						
Height (without shoes) Weight						
Any recent chang	e in weig	ght?		• • • • • • • • • • • • • • • • • • • •		
Temperature		• • • • • • • • • • • • • • • • • • • •				
Girth of Chest: - (a) (After full insp	oiration)					
(b) (After full exp	oiration) .					
2. Skin: Any obvi	ous disea	ase	• • • • • • • • • • • • • • • • • • • •	•••••		
3. Eyes: (1) Any o	disease	•••••				
(2) Night Blindne	ss	• • • • • • • • • • • • • • • • • • • •				
(3) Defect in colo	ur vision				(Mandato	ory Test)
Note: Defects in c	colour vis	sion is not suit	table for the	post of Inspe	ector GST in C	CBIC.
(4) Field of vision	ı					
(5) Visual Acuity						
(6) Fundus exami	nation					
Acuity of Vision	1	Naked Eye	With	,	Strength of Gl	asses
Distant Vision	D.E.		Glasses	Sp.	Cyl.	Axis
Distant vision	R.E.					
Near Vision	L.E. R.E.					
incar vision						
Hypermetropia (N	L.E. Manifest)					
R.E.	ramiest					
L.E.						
4. Ears: Inspection	n		Hearing	Right Far		
4. Lars. hispection		• • • • • • • • • • • • • • • • • • • •	_	Left Ear		
5 Clanda		T1				
5. Glands					•••••	
6. Condition of te						.1
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: LiverSpleen	KidneysTumors
(b) Haemorrhoids Fisti	ıla
10. Nervous system: Indications of nervous or m	ental 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 Civil Surgeon /CMO 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:				
Signature				

Civil Surgeon /CMO

## PRO FORMA -II

## **Candidate's Statement/ Declaration**

1.	-	your Name: ock letters)	
2.	Roll N	No.:	
			Candidate's Signature
Signed	l in my	presence	
Signat	ure of t	he Civil Surge	eon /CMO
		To be	e filled in by the Civil Surgeon /CMO
NOTE catego			should record their findings under one of the following three st X-ray test of the Candidate.
Name	of the (	Candidate	
	(i)	Fit	
	(ii)	Unfit on acco	ount of
	(iii)	Temporarily	unfit on account of
Place:			
Date:			
			Signature
			Civil Surgeon /CMO

#### FORM OF DECLARATION (APPLICABLE TO BOTH SEXES)

Snr	1 / Smt. / Kumarideclares:
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.
the declara	plemnly affirm that the above declaration is true and I understand that in the event of ation being found to be incorrect after my appointment, I shall be liable to be from service.
Date:	<u>Signature</u>
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)
То,	
Sir / Mada	m,
from the o	I request that in view of the reasons stated below, I may be granted exemption peration 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,

#### **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) Panchaya	t Inspectors
C	Certified that I have known Shri./S	Smt/Kum.		
son/daug	ghter of Shri.	for the	ne past	years and
	_ months and that to the best of	my knowledge and be	lief the particula	ars furnished
by him/h	ner are correct.			
PLACE:		SIGN	NATURE	

#### TO BE FILLED BY THE OFFICE

Designation or Status & Address

i) Name, Designation and Full Address of the appointing authority

DATE:

ii) Post for which the candidate is being considered

## ATTESTATION FORM

				"WA	RNING"	
Γ				The furnishing of fa factual information	alse information or suppression of any in the Attestation Form would be a is likely to render the candidate unfit for	
	Affix signed passport size (5cms X 7 cms) approx copy of recent photograph		2	debarred, acquitted e submission of this fo immediately to the ar	prosecuted, bound down, fines convicted, etc., subsequent to the completion and orm, the details should be communicated uthorities to whom the Attestation Form, failing which, it will be deemed to be 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 fu capitals) with a (Please indicat added or dro stage, any part or surname	aliases, if any, the if you have apped in any		Surname	Name	
2	Present Addre Village, Thana or Hou Lane/Street/Ro	a and District, se No.,				
3(a)	Home Addres Village, Thana or Hous Lane/Street/ R and name Headquarters)	a and District, se Number, oad and Town				
(b)	If originally Pakistan / (erstwhile East address in that the date of Indian Union.	Bangaladesh Pakistan) the t country and				
4	Adhaar Card (if available)	No.				
5	PAN No. (if a	available)				
6	Nationality					
7.(a)	Date of Birth					
(b)	Present Age					
(c)	Age at Matric	culation				
8. (a)	Place of birth state in which	•				

(b)	District ar which you b	nd State to belong							
(c)		nd State to your father							
9.(a)	Your Religi								
(b)	Scheduled								
10	Particulars of year at a tir	of places (with me during the p of all places wh	reced	ling five y	ears.	In case of st	ay abroad (i	including Pa	kistan),
From	То	Residential address in full (i.e. Village, Thana and District, or House No., Lane/Street/Road & Town)  Name of the District F place mentioned in the properties of the District F place mentioned in the District F place mentio							
11.	Name (in full & aliases if any)	Nationality birth or domicile)	(by by	Place birth	of	Occupation, if employed, give designation and official address	Present postal address (if dead, give last address)	Permanent address	Home
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		which ng with	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 <sup>th</sup> year of age.						
	hool/ College wi ll Address	th Date of	Date of entering		Date of leaving		Examination passed	
14. (a)	or a Ser Sector U	ni-Governn	nent or a Qu or a private	asi Govern	nment body o	r an autor	tral or State Government nomous body or a Public 1 particulars with date of	
Period En		Emolumen	Designation and noluments and nature of Employment		Full Name and Address of Employer		Reasons for leaving previous service	
14.(b)	owned or con body/University If you have let Rules 1965, or you, or had you	employmer trolled by y/Local Bod it service or any similar been called	nt was under the Govern y.  In giving a macorresponding the second of th	ment of nonth's no ng rules, w blain your	India or a Statice under Ruthere any disci	State Gov  lle 5 of Coplinary pro  matter at	covernment/ Undertaking ernment/an autonomous  CS (Temporary Service) occedings framed against the time you gave notice etually terminated?	

15. (1)	(a)	Have you ever been kep	ot under detention?	Yes/No			
	(b)	Have you ever been arro	ested?	Yes/No			
	(c)		prosecuted? (i.e. has a charge sheet in a against you in any court of law)	Yes/No			
	(d)	Is any original case per the time of filling up the	nding against you in any Court of Law at a Attestation Form?	Yes/No			
	(e)	Have you ever been offence?	convicted by a Court of Law for any	Yes/No			
	(f)	Whether discharged/e institution under the Go	xpelled/withdrawn from any training/vt. or otherwise.	Yes/No			
	(g)	Have you ever been reducational authority/ in	usticated by any University or any other astitution.	Yes/No			
	(h)	•	parred / disqualified by any Public Service election Commission for any of its ?	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 the this attestation form					
Notes:	(i)		<b>RNING</b> ' at the top of this attestation form.				
	(ii)	Specific answers to each the case may be.	h of the questions should be given by striking	ng out 'YES' or 'NO' as			
16.	Name	s of two responsible	1)				
	-	ersons of your locality or					
		wo references to whom you re known with Designation, 2)					
	full	Address and	2)				
		e/Landline no.)					
	•	DECI	ARATION				
I am fully the author criminal/o	aware that orities have civil/legal	at by providing false inforce full right to terminat action as a consequence.	on is correct and complete to the best of my rmation or suppressing material information e my appointment letter and I am also the might impair my fitness for employment	while filling this form, liable for appropriate			
Place:							
Date:			Signature of the candid	ate			

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

# **CHARACTER CERTIFICATE**

Certified that I have known S	shri / Smt
son / wife / daughter of	for the last
years / months and th	nat 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:
CHARAC	TER CERTIFICATE
	Shri / Smt
	for the last
	nat to the best of my knowledge and belief he / she
for Government employment.	no antecedent which render him / her unsuitable
Shri / Smt	is not
related to me.	
Date:	Signature:
Place:	Designation: