

I/1662439/2023

 	<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 Tamil Nadu & 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</p>	 
	<p>ई-मेल / Email: ccaestt- prcco@gov.in/cca.estt.section2@gmail.com दूरभाष / Ph: 28331011 फैक्स / Fax: 044-28331015</p>	

फा.सं./F.No. GCCO/CCA/RECR/43/2023-CCAESTT-

दिनांक / Date: /11/2023

नोटिस / NOTICE

विषय : तीसरा और आखिरी मौका - आशुलिपिक परीक्षा, 2022 के परिणाम के आधार पर कर्मचारी चयन आयोग द्वारा नियुक्ति हेतु संस्तुत आशुलिपिक ग्रेड - I और II का आवंटन - दस्तावेज सत्यापन के लिए सूचना पत्र - तत्संबंधी।

Sub : Third & final Chance - Allocation of Stenographers Grade – I & II recommended for appointment by the SSC on the basis of result of Stenographer Examination, 2022 – Call letter for Document verification - Reg.

संदर्भ : इस कार्यालय के दिनांक 25.10.2023 का समसंख्यक पत्र ।

Ref : This Office letter of even no. dated 25.10.2023

बोर्ड के दिनांक 12.09.2023 के पत्र सं. ए-12034/कर्म.च.आ./06/2022-प्रशा.III(बी)/I/73213/2023 के संदर्भ में आशुलिपिक परीक्षा, 2022 के परिणाम के आधार पर कर्मचारी चयन आयोग द्वारा नियुक्ति हेतु संस्तुत आशुलिपिकों (सी.बी.आई.सी.) के आवंटन के संबंध में, निम्नलिखित अभ्यर्थियों को दस्तावेज सत्यापन में शामिल होने का द्वितीय अवसर दिया जाता है। उम्मीदवारों को नीचे दिए गए विवरण के अनुसार 21.11.2023 को सुबह 10.00 बजे कार्यक्रम स्थल पर अधोहस्ताक्षरी को रिपोर्ट करने का निर्देश दिया गया है।

With reference to the Board's letter F. No. A-12034/SSC/06/2022-Ad.III(B)/I/73213/2023 dated 12.09.2023 allocating Stenographers (CBIC) recommended for appointment by the SSC on the basis of results of Stenographer Examination 2022, the following candidates are granted Third & Final chance to attend the document verification. The candidates are directed to report to the undersigned at the venue on **21.11.2023** at **10.00 AM** as detailed hereunder.

क्रम. सं. Sl. No	रैंक Rank	अनुक्रमांक सं. Roll No	नाम Name	दस्तावेज सत्यापन की तिथि Date for Document Verification
1.	257	2201052104	ARMAYA AWASTHI	
2.	543	2201038665	PRABHUNA ARORA	
3.	768	3009014718	NEETESH AGARWAL	
4.	851	2201026560	PRINCE SONI	
5.	881	2003002149	SACHIN KUMAR	
6.	910	3009003894	SHOBHIT SINGH	

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7.	965	3010005465	DHEERENDRA KUMAR	21-11-2023
8.	1094	2201048715	SUNDER SINGH	
9.	1097	3205000948	RAUNAK RAJ	
10.	1133	3005000854	YAKOOB AHMAD	
11.	2508	3009014036	PARUL TIWARI	
12.	3235	3010012159	RAVITA	
13.	3264	3010024056	AJAY PRATAP SINGH	
14.	3290	2201035538	SAD ALI	
15.	3307	3010024387	ANUJ KUMAR	

2. रिपोर्टिंग करते समय, अभ्यर्थियों को माल और सेवा कर एवं केन्द्रीय उत्पाद शुल्क, चेन्नई के (<https://gstchennai.gov.in/promotion-posting-transfer.php>) वेबसाइट पर उपलब्ध सत्यापन फॉर्म विधिवत भरकर (हाथ से) तीन सेट मूल प्रति में इनके प्रमाणों के प्रमाण पत्रों के साथ अनिवार्य रूप से जमा करना होगा :

While reporting, the candidates are required to submit the duly filled (by hand) in Attestation forms available in the GST & Central Excise Chennai (<https://gstchennai.gov.in/promotion-posting-transfer.php>) Website in **three sets in original** without fail along with **original** certificates in proof of:

7. जन्म तिथि दर्शाते हुए मैट्रिक / हाई स्कूल प्रमाण पत्र ।

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

7. शैक्षिक योग्यता के समर्थन में शैक्षणिक प्रमाण पत्र ।

b. Academic Certificates in support of Educational Qualification.

7. छायाप्रतियों के साथ निर्धारित प्रपत्र में अनुसूचित जाति / अनुसूचित जनजाति / अन्य पिछड़ा वर्ग के मामले में मूल जाति / सामुदाय प्रमाण पत्र ।

c. Original Caste / Community Certificate in case of SC/ST/OBC in the prescribed form along with the photocopies.

7. ईडब्ल्यूएस अभ्यर्थियों के मामले में आय और संपत्ति प्रमाण पत्र।

d. Income and Asset Certificate in case of EWS candidate.

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

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

7. केन्द्र या राज्य सरकार के दो राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से चरित्र प्रमाण पत्र (मूल में 2 सेट)

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- f. Character Certificate from two Gazetted officers of the Central or State Government or Stipendiary Magistrates. (2 sets in original)
 7. केन्द्र या राज्य सरकार के दो राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से पहचान प्रमाण पत्र (मूल में 2 सेट)
 - g. Identity Certificate from a Gazetted officers of the Central or State Government or Stipendiary Magistrates. (2 sets in original)
 7. स्वस्थता प्रमाण पत्र उस चिकित्सक से प्राप्त किया जाना है जो सिविल सर्जन के रैंक से नीचे न हो । महिला उम्मीदवारों को उक्त प्रमाण पत्र महिला चिकित्सक से प्राप्त किया जाना है जो सिविल सर्जन के रैंक से नीचे न हो । (अनुलग्नक संलग्न)
 - 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. (Proforma Enclosed)
 7. 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 यह 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.
 7. भूतपूर्व सैनिकों के मामले में सेवा-मुक्ति प्रमाण पत्र।
 - j. Discharge Certificate in case of Ex-Servicemen.
 7. आधार कार्ड और पैन कार्ड ।
 - k. Aadhaar card and PAN Card
 7. 5 से.मी x 7 से.मी परिमाण 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.
 - 3 . अभ्यर्थियों को सलाह दी जाती है कि वे दस्तावेज़ सत्यापन पूरा करने के लिए कम से कम 02 कार्य दिवसों के लिए अपने यात्रा कार्यक्रम की योजना बनाएं ।
- The candidates are advised to plan their itinerary for at least 02 working days to complete Document Verification.
4. यदि किसी अभ्यर्थी को कोई कारण बताओ नोटिस (एससीएन) जारी किया गया है , तो कर्मचारी चयन आयोग को उत्तर के प्रमाण के साथ कारण बताओ नोटिस का उत्तर सत्यापन के समय अनिवार्य रूप से लाना होगा ।
- If any candidate has been issued any Show Cause Notice (SCN), the reply of SCN along with proof of reply to the SSC should be brought at the time of verification without fail.
- 5 . अभ्यर्थियों को प्रवास के दौरान भोजन और आवास की व्यवस्था स्वयं करनी होगी । प्रमाण पत्र सत्यापन और चिकित्सा परीक्षण में भाग लेने के लिए विभाग द्वारा कोई यात्रा या अन्य खर्च का भुगतान नहीं किया जाएगा ।

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The candidates have to make their own arrangements for boarding and lodging during the stay. No Travelling or other expenses will be paid by the Department for attending the Certificate verification and Medical Examination.

6. दस्तावेज़ सत्यापन के लिए निर्धारित तिथि पर रिपोर्ट नहीं करने की स्थिति में, यह माना जाएगा कि अभ्यर्थी विभाग में नियुक्ति के प्रस्ताव तथा आपके नामांकन स्वीकार करने के इच्छुक नहीं हैं और रिपोर्ट न करने से उत्पन्न होने वाले सभी परिणाम प्रभाव में आएंगे।

In the event of not reporting on the prescribed date for the Document Verification, it will be presumed that the candidate(s) are not interested in accepting the offer of appointment in the department and your nomination and all consequences arising out of the non-reporting shall come into effect.

7. समय सीमा नहीं बढ़ाई जाएगी और यदि अभ्यर्थी नियत दिन पर रिपोर्ट नहीं करते हैं, तो दस्तावेज़ कर्मचारी चयन आयोग को वापस कर दिए जाएंगे। तिथियों के पुनर्निर्धारण के लिए अभ्यर्थियों के किसी भी अनुरोध पर विचार नहीं किया जाएगा, जब तक कि कोई वैध कारण मौजूद न हो।

No further extension of time will be granted and the dossiers will be returned to SSC in the event that the candidate does not report on the appointed day. Any request from the candidates for rescheduling of dates will not be entertained, unless valid reasons exist.

8. अभ्यर्थियों को पृथक से सूचना पंजीकृत डाक और ई - मेल द्वारा भेजी जा रही है। अभ्यर्थी को इस नोटिस की हार्ड कॉपी प्राप्त न होने की स्थिति में भी अपने नाम के सामने उल्लिखित तिथियों पर दस्तावेज़ सत्यापन में शामिल हों। अभ्यर्थी सत्यापन प्रपत्र डाउनलोड करें एवं दस्तावेज़ सत्यापन के समय विधिवत भरे हुए प्रपत्र प्रस्तुत करें।

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 hard copies of this notice. The candidates may download the attestation forms and submit the duly filled in forms at the time of attending document verification.

स्थान एवं समय :

माल और सेवा कर एवं केन्द्रीय उत्पाद शुल्क प्रधान मुख्य आयुक्त कार्यालय, चेन्नई अंचल,
26/1, महात्मा गांधी रोड, नुंगम्बाक्कम, चेन्नई

समय : प्रातः 10.00

नोट : किसी भी जानकारी के लिए कृपया **044-28331011** पर संपर्क करें

VENUE & TIME:

Office of the Principal Chief Commissioner of GST & Central Excise, Chennai Zone,
26/1, Mahatma Gandhi Road, Nungambakkam, Chennai- 600034.

Timing: 10:00 A.M.

Note: - For any query please contact on **044-28331011**

Signed by

Jayapriya Dharanipathi

(**डॉ. जयप्रिया / D. JAYAPRIYA**)

Date: 16-11-2023 09:38:24

अपर आयुक्त / ADDITIONAL COMMISSIONER

सेवा में / To

अभ्यर्थी / The Individual (त्वरित डाक द्वारा / By Speed Post)

संलग्न / Encl:

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1. अनुप्रमाणन प्रपत्र / Attestation Form
2. चिकित्सा प्रपत्र / Medical Proforma
3. चरित्र प्रमाण पत्र / Character Certificate
4. पहचान प्रमाण पत्र / Identity Certificate
5. अन्य पिछड़ा वर्ग से संबंधित घोषणा प्रपत्र / OBC Declaration Certificate
6. वैवाहिक स्थिति प्रमाण पत्र / Marital Status Certificate

सभी प्रपत्र एवं संलग्नक चेन्नई 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), प्रधान मुख्य आयुक्त कार्यालय - वेबसाइट पर प्रदर्शित करने हेतु ।

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

Form of declaration to be submitted by OBC Candidate
(in addition to the community certificate)

I, _____ Son/Daughter of Shri.
 _____ Resident of village/town/city
 _____ district _____
 State _____ hereby declare that I belong to the
 _____ community which is recognized as a backward class
 by the Department of Personnel and Training Office memorandum No. 36012/22/93-
 Estt.(SCT) dated 08.09.1993. It is also declared that as on closing date I do not belong
 to persons/sections (Creamy layer) mentioned in column 3 of the Schedule to the
 above referred memorandum dated 08.09.1993, O.M. No. 36033/3/2004-Estt.(Res.)
 dated 9th March, 2004, O.M No. 36033/3/2004-Estt. (Res) dated 14th October, 2008
 and O.M. No. 36033/1/2013-Estt. (Res.) dated 27th May, 2013.

Signature of the Candidate:

Full Name:

~~Roll No.~~

Place:

Date:

Declaration / Undertaking not signed by Candidate will be rejected.

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

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

ATTESTATION FORM

<div style="border: 1px solid black; padding: 10px; text-align: center;"> Affix <u>signed</u> 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:

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

7. Have you been examined by a Civil Surgeon/ CMO for medical 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 held?

11. Result of the Medical 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 CMO/Civil Surgeon

Report of the Medical 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 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

Candidates's Statement/ Declaration

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

Candidate's Signature

Signed in my presence

Signature of the Civil Surgeon /CMO

To be filled in by the Civil Surgeon /CMO

NOTE. - The Civil Surgeon/CMO 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:

Signature

Civil Surgeon/CMO