ATTESTATION FORM

(THE CANDIDATES SHOULD PROPERLY FILL THE ATTESTATION FORM WITH HIS/HER OWN HAND WRITING)

Latest colour passport size Photograph of the candidate

Name of the Department		Na	me of the Head of the Dept.	
		s only with aliases, if y stage any part of y		
SURNAME				
NAME				
Recruitme	nt/Ex- Serviceme	e with category (Appen quote/compassion d copies of the document	ate ground)	rect
(i) Designat	ion			
(ii) Place of	Working			
(iii) Direct re	ecruitment	Ex-Serviceman	Compa	ssionate
2. Details of ad	dresses:			
		a. Present		b. Permanent
House/Apartn	nent/Flat No.			
Name of Apa	rtment			
Lane Name				
Street & Road	ı			
Village				
Mandal / Talu	ık			
Town / City				
District				
State				
Pin Code				

Contact Phone Numbers		Mo	bile		line office STD Code)	Landline Residence (with STD Code)	
i C	c) If originally a Of Pakistan, the ac n that Dominion a late of migration to Union Particulars of p	ddress and the so Indian	ou have	resided (during the <i>p</i>	preceding five	years
	from the date of				-		•
	From (Month / Year)	To (Month / Yo	ear)	(i.e. (Apa Stre	, House / A Flat Nun artment/Con eet/Colony	mplex/Lane/	Police station and District
1							
2							
3							
4							
5							
4	1. Father's detai	ils:					
	(a) Name in ful	ll with aliases,	, if any				
	(b) Profession						
	(c) If in service official addre		tion and				
	(d) Present posta	al address (if	dead,	House	No.		
	give last address			Lane N	lame		
				Street	& Road		
					e/Mandal		
				Dist			
				State	1		
				Pin Co	ae		
	(e) Permanent House Address			House	No.		
				Lane N	Vame		
				Street	& Road		
				Village	e/Mandal		
				Dist			
				State			
				Pin Co	de		

5.	(i) Nationality of :
	(a) Father
	(b) Mother
	(c) Wife / Husband
(ii) Place of Birth of Wife / Husband
6.	(a) Date of birth of the applicant
	(b) Present Age
	(c) Age at SSC / Matriculation
	7. (a) Place of birth, District and State
	(b) District and State to which you belong
	8. (a) Religion
	(b)Are you member of Scheduled Caste / Scheduled Tribe / Backward Class?
	Scheduled Caste Scheduled Tribe Backward Class
	Please specify the Class / Tribe Grade A,B,C,D & E
1	

9. Educational Qualifications showing places of education with years in schools and colleges since 15th year of age (Please enclose certified copies of Study Certificates and indicate whether study is regular or distance / correspondence).

Course	Name of the School / College with full address (Village / Mandal / District / City	Date of entering (mention month & year)	Date of leaving (mention month & year)	Examination passed with Reg.No.etc. (Name of the group i.e.,Inter/Degree/ Diploma/ PG,etd	Police Station and District
1. SSC/ Matriculation					
2.Intermediate/ Diploma					
3. Graduation/ Professional Course					
4. Post Graduation					
5. Any other qualification					

10. If you have at any time been employed, give details, (Please enclose certified copies of the documents).

Designation of Post held or description of work	Period		Full Address of the	
	From	То	Office, Firm or Institution	removed from service / resigned to the post? If so, please give details.

state /central preventive the Court of Appeal or set a (Note: If detailed, convicte form, the details should b authority to whom the Attes	detention laws for aside by the Appell ed, debarred etc. su see communicated istation Form has be oppression of factuation	any offence? Whe ate Court if appea bsequent to the commediately to the en sent earlier, as al information). I	ompletion and submission of this ne concerned Department or the the case may be, failing which it if the answer is 'Yes', the full
12. Name and complete address two referees to whom you	•	•	locality to whom you are known cod relatives).
House/Apartment/ Flat. No.	Referee-	1	Referee-2
Name of Apts./ Complex			
Lane Name			
Street & Road			
Village			
Mandal/Taluk			
Town/City			
District			
State			
Pin Code			
13. Have you ever been membe organization/Youth/Studen		-	

DECLARATION SHOULD BE SIGNED BY THE CANDIDATE

- 1. I here declare that the statements made in this form are true to the best of my knowledge and belief.
- 2. I am married/unmarried and have only one wife living (delete which is not applicable).
- 3. I am fully aware that furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification and is likely to render me unfit for employment under the Government.
- 4. I am also fully aware that if it comes to notice at any time during my service that false information has been furnished or that there has been suppression of factual information in the Attestation Form, my services would be liable to be terminated solely on this ground.

Date:		Signature of Candidate
Place:		
	ATURE OR OTHER	BY A GAZETTED OFFICER OR MEMBER OF R AUTHORITY AS PRESCRIBED BY THE NTING AUTHORITY
Certified that I	have known Sri / Sm	t / Kum
	Son / Daughter /	Wife of
For the last	years	months and to the best of my knowledge and belief,
the particulars furn	ished by him / her are	e correct.
Date:		(Signature) Name & Designation with Seal

Photograph of the candidate attested by Gazetted Officer / MLA / other with seal Competent Authority