

	<p>कार्यालय मुख्य आयुक्त OFFICE OF THE CHIEF COMMISSIONER सी.जी.एस.टी, केन्द्रीय उत्पाद शुल्क एवं सीमा शुल्क, भोपाल ज़ोन CGST, CENTRAL EXCISE &amp; CUSTOMS, BHOPAL ZONE 35-C, जी.एस.टी. भवन, प्रशासनिक क्षेत्र, अरेरा हिल्स, भोपाल 35-C, GST Bhawan, Administrative Area, Arera Hills, Bhopal (M.P.)-452011 Tel.No. 0755-2765208, Email: ccu-cexbpl@nic.in</p>	 आज़ादी का अमृत महोत्सव
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F.No. II(3)/15/CCU/BZ/2023/

Dated:- 07/12/2023

सूचना / NOTICE

विषय: कर्मचारी चयन आयोग, संयुक्त स्नातक स्तरीय परीक्षा, 2023 के माध्यम से कार्यकारी सहायक, सीजीएसटी एवं केन्द्रीय उत्पाद शुल्क के पद के लिए आवंटित अभ्यर्थियों के दस्तावेज़ सत्यापन के स्थान और तिथि की सूचना- संबंधित।

Sub: Intimation of date and venue for document verification of candidates allocated through the Staff Selection Commission, Combined Graduate Level Examination, 2023 for the posts of Executive Assistant of CGST & Central Excise-reg.

कर्मचारी चयन आयोग द्वारा आयोजित संयुक्त स्नातक स्तरीय परीक्षा, 2023 के परिणामों के आधार पर कार्यकारी सहायक, सीजीएसटी एवं केन्द्रीय उत्पाद शुल्क के पदों के लिये अभ्यर्थियों को दस्तावेज़ सत्यापन हेतु सी.जी.एस.टी, केन्द्रीय उत्पाद शुल्क एवं सीमा शुल्क, भोपाल ज़ोन को आवंटित किया गया है।

On the basis of the results of the Combined Graduate Level Examination, 2023 conducted by the Staff Selection Commission, candidates for the posts of Executive Assistant, CGST and Central Excise have been allocated to the CGST & Central Excise Zone, Bhopal for Document Verification.

2. अनुलग्नक-ए में शामिल उम्मीदवारों का दस्तावेज़ सत्यापन दिनांक 15.12.2023 से 19.12.2023 के दौरान मुख्य आयुक्त, सीजीएसटी, केन्द्रीय उत्पाद शुल्क और सीमा शुल्क, 35-सी, जीएसटी भवन, प्रशासनिक क्षेत्र अरेरा हिल्स, भोपाल-462011 के कार्यालय द्वारा आयोजित किया जाएगा। प्रत्येक उम्मीदवार के संबंध में तारीख और समय अलग से सूचित किया जाएगा, इसलिए उम्मीदवारों को सलाह दी जाती है कि दस्तावेज़ सत्यापन के लिए इन तिथिओ पर आवश्यक रूप से उपस्थित हों। अभ्यर्थियों से अनुरोध किया जाता है कि वे पूरी प्रक्रिया हेतु 05 दिन के लिये अपने रहने की व्यवस्था स्वयं करें। दस्तावेज़ सत्यापन की प्रक्रिया कैडर संवर्ग नियंत्रण प्राधिकारी, भोपाल ज़ोन द्वारा डोज़ियर की प्राप्ति और सत्यापन के अध्यक्षीन है

The Document Verification of the candidates figuring in Annexure-A will be conducted during 15.12.2023 and 19.12.2023 by the Office of the Chief Commissioner, CGST, Central Excise & Customs, 35-C, GST Bhawan, Administrative Area, Arera Hills, Bhopal-462011. The exact date and time in respect of each candidates will be communicated separately. Hence candidates are advised to plan their itinerary for at least 5 days so as to attend DV. The process of Document Verification is subject to receipt and verification of dossiers by the Cadre Controlling Authority, Bhopal Zone.

3. संलग्न अनुप्रमाणन प्रपत्र, अभ्यर्थी द्वारा स्वतः विधिवत् भर कर (केवल हस्तलिखित) दस्तावेज़ सत्यापन के समय तीन प्रतियों में बिना किसी चूक के अधोहस्ताक्षरी को प्रस्तुत किया जाना चाहिए।

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

4. अभ्यर्थियों को निर्देश दिया जाता है कि वे दस्तावेज़ सत्यापन के समय निम्नलिखित मूल दस्तावेज़ (एक सेट फोटो प्रति के साथ) अवश्य प्रस्तुत करें:

The candidates should bring the following documents (in original) along with 1 set of photocopies 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.
- ख) शैक्षिक योग्यता के समर्थन में शैक्षणिक प्रमाण पत्र।  
b) Academic Certificates in support of Educational Qualification.
- ग) निर्धारित प्रपत्र में अनुसूचित जाति/अनुसूचित जनजाति/अन्य पिछड़ा वर्ग के मामले में मूल जाति/समुदाय प्रमाण पत्र।  
c) Original Caste/Community Certificate in case of SC/ST/OBC in the prescribed form.
- घ) विकलांग व्यक्ति (दिव्यांगजन) अभ्यर्थी के मामले में प्रमाण पत्र।  
d) Certificate in case of Person with disabilities (Divyangjan) candidate.
- ङ) 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।  
f) Character Certificate from two Gazetted officers of the Central or State Government or Stipendiary Magistrates.
- छ) केन्द्र या राज्य सरकार के राजपत्रित अधिकारी या वृत्तिकाग्राही मजिस्ट्रेट से परिचय प्रमाण पत्र।  
g) Identity Certificate from a Gazetted officer of the Central or State Government or Stipendiary Magistrates.
- 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। (अनुलग्नक 'ख')
- ह) 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 दस्तावेज़ सत्यापन में उपस्थित होने के लिये, पिछले नियोक्ता से इस नोटिस के संदर्भ में जारी किय गया सेवा-मुक्ति प्रमाण पत्र/NOC।  
i) Discharge Certificate/NOC to attend DV from previous employer in case the candidate is presently employed in any of the offices under the Central Government/State Government, Autonomous Body, and Public Sector Undertaking. The certificate should be obtained with reference to this Notice.
- ञ) आधार कार्ड और पैन कार्ड।  
j) Aadhar card and PAN Card.

- ट) 5 सेमी x 7 सेमी आकार की रंगीन तस्वीरों के 3 सेट अनुप्रमाणन प्रपत्रों पर चिपकाए जाने हैं ।  
k) Colour photographs of size 5cm x 7cm to be pasted on the three sets of Attestation Forms.

5. दस्तावेज़ सत्यापन 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, it will be presumed that the candidate is not interested in accepting the offer of appointment in the department and his/her nomination will be treated as cancelled.

6. अभ्यर्थी उनको सूचित की गई तारीखों पर शारीरिक मानक / परीक्षा के लिए इस ईमेल के आधार उपस्थित हों । अभ्यर्थी संलग्न सत्यापन प्रपत्रों को वेबसाइट <https://ccobz.gov.in/cgle.html> से डाउनलोड कर सकते हैं और विधिवत भरे गए प्रपत्रों को शारीरिक क्षमता परीक्षा में उपस्थिति होने के समय प्रस्तुत कर सकते हैं।

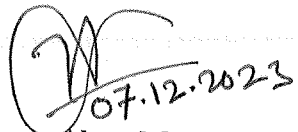
The candidates should attend the physical standard tests/DV on the dates communicated to them on the basis of this email. The candidates may download the enclosed attestation forms from <https://ccobz.gov.in/cgle.html> and submit the duly filled-in forms at the time of attending physical tests.

7. अपरिहार्य परिस्थितियों में दस्तावेज़ सत्यापन की तिथियों में बदलाव किया जा सकता है । अतः अभ्यर्थियों को सलाह दी जाती है कि वे कार्यालय की वेबसाइट <https://ccobz.gov.in> व अपने ईमेल को नियमित रूप से देखते रहें ।

In the event of unavoidable circumstances, the Document Verification may be postponed/rescheduled. Accordingly, candidates are advised to keep checking the Official website <https://ccobz.gov.in> and their individual email.

संलग्न/ Encl:

- (1) अनुलग्नक 'क' /Annexure 'A' –List of the Candidates
- (2) अनुलग्नक 'ख' / Annexure 'B' –Medical Certificate
- (3) अनुप्रमाणन प्रपत्र /Attestation Form
- (4) चरित्र प्रमाण पत्र /Character Certificate
- (5) पहचान प्रमाण पत्र /Identity Certificate
- (6) वैवाहिक स्थिति प्रमाणपत्र /Marital Status Certificate

  
(Faraz Ahmad Qureshi)  
Additional Commissioner

प्रति/To

अभ्यर्थियों को (अनुलग्नक 'क' पर दी गई सूची के अनुसार)  
The candidates / As per the list enclosed as Annexure 'A')

## Annexure - A List of Candidates

Executive Asst. (27)

SI	roll	cname	gender	dob	cat1	cat2	cat3	mobile	email_id	loc_po	Post Name	loc_c	Rank	Exam Center	State	CCA NAME	SSC Region
55	6006024038	AVINASH CHOUHAN	2	10/09/1995	2			8604293456	avichouhan1@gmail.com	B32	EA	2	SL\II\07129	Indore	Madhya Pradesh	Bhopal CGST	MPR Region
56	6001003901	HIMANSHU MANKELE	2	10/01/1993	1			7509353998	himanshumankele123@gmail.com	B32	EA	1	SL\II\06222	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
57	6007017722	PRAGYA CHOUDHARY	1	13/04/2000	1			8318375006	pragyachoudhary99@gmail.com	B32	EA	1	SL\II\06019	Jabalpur	Madhya Pradesh	Bhopal CGST	MPR Region
58	6001018971	KM SWATI ARYA	1	12/07/1997	1			7309246285	swatiarya1997.sasa@gmail.com	B32	EA	1	SL\II\05971	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
59	6006027471	VIVEKANAND PRAJAPATI	2	25/09/1999	6			9755757559	vivekprajapati152@gmail.com	B32	EA	6	SL\II\04260	Indore	Madhya Pradesh	Bhopal CGST	MPR Region
60	6001029578	SAFIN KHAN MEWATI	2	03/07/1999	6			9111427122	mewatisafin512@gmail.com	B32	EA	6	SL\II\04259	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
61	6204011469	UJJWAL KUMAR	2	31/01/1998	0			9525289613	rajujwal93@gmail.com	B32	EA	0	SL\II\04067	Raipur	Chhattisgarh	Bhopal CGST	MPR Region
62	6014002887	SHIVAM SINGH	2	01/07/1996	6			7999792782	singhsurya700@gmail.com	B32	EA	6	SL\II\04049	Satna	Madhya Pradesh	Bhopal CGST	MPR Region
63	6204008530	DHEERENDRA SINGH	2	15/03/1997	6			6397829103	dheerendra1531997@gmail.com	B32	EA	6	SL\II\04037	Raipur	Chhattisgarh	Bhopal CGST	MPR Region
64	6007008690	DHARMENDR LODH	2	02/04/1998	6			8815460147	singh93dharam@gmail.com	B32	EA	6	SL\II\03820	Jabalpur	Madhya Pradesh	Bhopal CGST	MPR Region
65	6006008207	AMIT PRADHAN	2	20/07/1995	0			9770607401	amitpradhan20071995@gmail.com	B32	EA	0	SL\II\03534	Indore	Madhya Pradesh	Bhopal CGST	MPR Region
66	6007003489	SATIYAM RAJ	2	30/08/1997	6			9122570731	rajsatyam694@gmail.com	B32	EA	6	SL\II\03448	Jabalpur	Madhya Pradesh	Bhopal CGST	MPR Region
67	6006020408	AJAYRAJ SINGH PARMAR	2	02/06/2000	9			7748876245	ajayrajsinghparmar@gmail.com	B32	EA	9	SL\II\03224	Indore	Madhya Pradesh	Bhopal CGST	MPR Region
68	6007008374	SHUBHAM VERMA	2	22/12/1996	9			8966022411	v96shubham@gmail.com	B32	EA	9	SL\II\03190	Jabalpur	Madhya Pradesh	Bhopal CGST	MPR Region
69	6001012002	ABHAY TIWARI	2	02/08/2001	9			9826673975	bhawnapinkytiwari@gmail.com	B32	EA	9	SL\II\03171	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
70	6006022222	AKHIL GUPTA	2	22/03/1996	9			9111077244	akhilshubhavarshney@gmail.com	B32	EA	9	SL\II\03095	Indore	Madhya Pradesh	Bhopal CGST	MPR Region
71	6005016903	DEEPALI SHARMA	1	19/10/1998	9			7440872046	deepali432sharma@gmail.com	B32	EA	9	SL\II\02933	Gwalior	Madhya Pradesh	Bhopal CGST	MPR Region
72	6001017419	VINAY KUMAR RATHORE	2	15/01/1995	6			7024281753	vinaykumarrathoret06@gmail.com	B32	EA	6	SL\II\02905	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
73	6001002236	ABHISHEK KUMAR	2	27/10/1997	6			6232071238	urabhisheklnctian@gmail.com	B32	EA	6	SL\II\02740	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
74	6202010833	GUNJAN TIWARI	2	17/07/1996	9			7987074132	gunjankumartiwari.5km@gmail.com	B32	EA	9	SL\II\02615	Bilaspur	Chhattisgarh	Bhopal CGST	MPR Region
75	6205000077	HARSH CHANDRAKAR	2	06/07/1997	6			8982196486	chandrakarharsh4@gmail.com	B32	EA	9	SL\II\02587	Durg	Chhattisgarh	Bhopal CGST	MPR Region
77	6005004215	VISHAL SHRIVASTAVA	2	01/09/1995	9			7987243845	vishal9893735117@gmail.com	B32	EA	9	SL\II\02358	Gwalior	Madhya Pradesh	Bhopal CGST	MPR Region
78	6202010161	PUSHPENDRA GUPTA	2	01/05/2002	0			8982815709	guptaraj.998877@gmail.com	B32	EA	9	SL\II\02242	Bilaspur	Chhattisgarh	Bhopal CGST	MPR Region
79	6001016957	POONAM GUPTA	1	02/08/1994	9			9340872085	pnm9713gupta@gmail.com	B32	EA	9	SL\II\02121	Bhopal	Madhya Pradesh	Bhopal CGST	MPR Region
81	6005003870	UDAY SHARMA	2	12/11/2000	0			7999120419	udaysir43@gmail.com	B32	EA	9	SL\II\01752	Gwalior	Madhya Pradesh	Bhopal CGST	MPR Region
82	6006006701	ANAND RAGHUWANSHI	2	06/03/2000	9			7697344232	anandakash1990@gmail.com	B32	EA	9	SL\II\01399	Indore	Madhya Pradesh	Bhopal CGST	MPR Region
83	6006007847	VIPUL MANI TRIPATHI	2	01/12/1997	9			8966000887	vipultripathi111@gmail.com	B32	EA	9	SL\II\01303	Indore	Madhya Pradesh	Bhopal CGST	MPR Region

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चिकित्सा प्रमाण पत्र  
MEDICAL CERTIFICATE

मैं इसके द्वारा प्रमाणित करता हूँ कि मैंने ..... विभाग में रोजगार के लिए ए उम्मीदवार ..... की जांच की है, और ..... को छोड़कर किसी भी रो (संचारी या अन्यथा) संवैधानिक कमजोरी, या दुर्बलता का खोज नहीं कर सकता, मैं इसको कार्यालय में रोजग के लिए एक अयोग्यता नहीं मानता हूँ। उसकी उम्र उसके स्वयं के बयान के अनुसार ..... साल और आकार से करीब ..... साल है।

I hereby certify that, I have examined ..... a candidate f employment in the ..... Department, and cannot discover that has a disease (communicable or otherwise) constitutional weakness, or infirmity exce ..... I do not consider this a disqualification for employment in the office of tl ..... His /her age is according to his/her own statement ..... years ar by appearance about ..... years.

दिनांक / Date:

सील सहित चिकित्सा अधिकारी का हस्ताक्षर

स्थान / Place:

Signature of the Medical Officer with seal

कार्यालय सील / Office Seal

## अनुबंध / ANNEXURE - III

### उम्मीदवारों के बयान और घोषणा

#### CANDIDATES STATEMENT AND DECLARATION

उम्मीदवार अपनी चिकित्सा जांच करने से पहले नीचे की आवश्यकता अनुसार बयान करना चाहिए और उससे संलग्न घोषणापत्र पर हस्ताक्षर करना चाहिए। उसके ध्यान नीचे नोट में निहित चेतावनी की ओर विशेष रूप से निर्देशित है।

The candidate must make the statement required below prior to his/ her medical examination and must sign the declaration appended thereto. His/her attention is specially directed to the warning contained in the note below: -

1. अपना पूरा नाम लिखिए (स्पष्ट अक्षरों में)  
State your name in full (in block letters)
2. अपनी उम्र और जन्म स्थान लिखिए  
State your age and place of birth
3. (क) यदि आप को कभी भी, चेचक, रुक रुककर होने वाले या चित्सी अन्य बुखार, ग्रंथियों की वृद्धि या पीप आना, रक्त का थूकना, अस्थिमा, हृदय रोग, फेफड़ों की बीमारी, आमवात के आक्रमण से कमजोरी होना, पथरी की बीमारी हुआ है ?  
(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?  
(ख) किसी भी अन्य बीमारी या दुर्घटना जिस की वजह से बिस्तर पर आराम करने की और मेडिकल या सर्जिकल इलाज के लिए आवश्यकता होती है ?  
(b) Any other disease or accident requiring confinement to bed and medical or surgical treatment?
4. आप ने पिछली बार कब टीका लगाया था ?  
When you were last vaccinated?
5. आप या आपके किसी संबंधी स्कारफुला का खपत, गठिया, दगा, फिट्टस, मिर्गी या पागलपन से पीड़ित हो गए हैं ?  
Have you or any of your near relations been afflicted with consumption scarfula, gout, asthma, fits. epilepsy or insanity?
6. अगर आप अधिक काम या किसी अन्य कारण के होने के कारण होरवौसनेरस के चित्सी भी रूप से पीड़ित हो गए हैं?  
Have you suffered from any form of horvousness due to over work or any other cause?
7. पिछले 3 वर्षों के भीतर एक चिकित्सा अधिकारी / मेडिकल बोर्ड द्वारा आप की जांच करके क्या आप को सरकार सेवा के लिए अयोग्य घोषित किया गया है ?  
Have you been examined and declared unfit for Govt. service by a Medical Officer /Medical Board, within the last 3 years?
8. अपने परिवार के संबंध में निम्नलिखित विवरण प्रस्तुत करें। / furnish the following particulars concerning your Family:-

पिता की उम्र, यदि जीवित है तो, और उनके स्वास्थ्य की स्थिति Father's age if living and state of health	पिता की मृत्यु के समय की उम्र और मौत का कारण Father's age at death and cause of death	जीवित भाइयों की संख्या, उनकी उम्र और स्वास्थ्य की स्थिति No. of brothers living, their ages & state of health	मृत भाइयों की संख्या, मृत्यु के समय की उम्र और मृत्यु के कारण No. of brothers dead their age at death and cause of death

माता की उम्र, यदि जीवित है तो, और उनके स्वास्थ्य की स्थिति Mother's age if living and state of health	माता की मृत्यु के समय की उम्र और मौत का कारण Mother's age at death and cause of death	जीवित बहनों की संख्या, उनकी उम्र और स्वास्थ्य की स्थिति No. of sisters living, their ages & state of health	मृत बहनों की संख्या, मृत्यु के समय की उम्र और मृत्यु के कारण No. of sisters dead their age at death and cause of death

मैं घोषणा करता /करती हूँ कि उपर्युक्त प्रश्नों के सभी उत्तर मेरी जानकारी और विश्वासके अनुसार सही हैं ।  
I declare all the above answers to be, to the best of my knowledge and belief, correct.

मैं यह भी सत्यनिष्ठा से समर्थन करता /करती हूँ कि मुझे किसी भी बीमारी या अन्य हालत के कारण एक चिकित्सा प्रमाण पत्र / पेंशन नहीं मिला है ।  
I also solemnly affirm that, I have not received a disability certificate /pension on account of any disease or other condition.

उम्मीदवार का हस्ताक्षर  
CANDIDATE'S SIGNATURE

मेरी उपस्थिति में हस्ताक्षर किए हैं  
SIGNED IN MY PRESENCE

दिनांक / Date:

स्थान / Place:

कार्यालय सील / Office Seal

सील सहित चिकित्सा अधिकारी का हस्ताक्षर  
SIGNATURE OF MEDICAL OFFICER WITH SEAL

नोट: - उम्मीदवार उपर बयान की सटीकता के लिए जिम्मेदार ठहराया जाएगा। जानबूझकर किसी भी जानकारी को दबा ने के कारण उन्हें नियुक्ति को खोने का, और अगर नियुक्त किया गया है तो, सेवानिवृत्ति भत्ता या उपदान के लिए सभी दावे का अधिकार खो देने का जोखिम उठाना होगा ।

Note: - The candidate will be held responsible for accuracy of the above statement. By the willfully suppressing any information he/she will incur the risk of losing the appointment, and if appointed, of forfeiting all claim to superannuation allowance or gratuity.

Year	1950	1951	1952
Production (in thousands of tons)	100	110	120
Consumption (in thousands of tons)	90	95	100
Exports (in thousands of tons)	10	15	20

The following table shows the production and consumption of steel in the United States from 1950 to 1952. The production of steel has increased steadily over the period, while consumption has also increased but at a slower rate. Exports have also shown a steady increase.

The increase in production is due to a number of factors, including the expansion of the steel industry and the growth of the economy. The increase in consumption is due to the growth of the automobile industry and the construction industry.

The increase in exports is due to the growing demand for steel in other countries, particularly in Europe and Asia. This is a result of the United States' position as a leading producer of steel.

The overall trend shows that the United States is becoming a more self-sufficient producer of steel, with a growing surplus that is being exported to other countries.

This growth in the steel industry is a key indicator of the overall health of the economy and the strength of the manufacturing sector.

The steel industry continues to play a vital role in the economy, providing the raw materials for a wide range of products and services.

The future of the steel industry looks bright, with continued growth and innovation expected in the years ahead.

The steel industry is a cornerstone of the American economy, and its growth is a testament to the strength and resilience of the United States.

The steel industry is a key component of the manufacturing sector, and its growth is essential for the overall health of the economy.

The steel industry is a vital part of the American economy, and its growth is a key indicator of the overall health of the country.

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## ATTESTATION FORM

<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>Affix <b>signed</b> passport size (5cms X 7 cms) approx copy of recent photograph</p> </div>		<p><b>“WARNING”</b></p> <p><b>1</b> 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.</p> <p><b>2</b> 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.</p> <p><b>3</b> 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.</p>	
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)	<b>Surname</b>	<b>Name</b>
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 <sup>th</sup> 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 ' <b>WARNING</b> ' 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)
<b>DECLARATION</b>			
<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>			
Place:			
Date:		Signature of the candidate	

**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:  
Place:

Signature:  
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:  
Place:

Signature:  
Designation:

CHARACTERISTICS

The following characteristics are typical of the material described above. The material is a high strength, low modulus, fiber-reinforced plastic. It is resistant to most acids, alkalis, and solvents. It has a high glass transition temperature and is suitable for use in high temperature environments. The material is also resistant to impact and abrasion.

The material is available in a variety of forms, including sheets, rods, and tubes. It is also available in a variety of colors and finishes. The material is easy to fabricate and can be machined to tight tolerances. It is also easy to repair and can be welded.

The material is suitable for use in a wide range of applications, including automotive, aerospace, and industrial. It is used in the manufacture of aircraft components, automotive parts, and industrial machinery. It is also used in the construction of chemical processing equipment and storage tanks.

The material is available from a number of suppliers. It is important to choose a supplier that is reputable and has a good track record. It is also important to choose a supplier that offers technical support and can provide samples of the material.

## 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

THE UNIVERSITY OF CHICAGO

THE UNIVERSITY OF CHICAGO  
DIVISION OF THE PHYSICAL SCIENCES  
DEPARTMENT OF CHEMISTRY  
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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

