

## अभ्यर्थियों के लिये निर्देश (Instructions for Candidates)

01. नियुक्ति प्रस्ताव के संबंध में - नियुक्ति प्रस्ताव की दुसरी प्रति बैंक में सेवाग्रहण हेतु उपस्थिति के समय हस्ताक्षर कर प्रस्तुत करें।
01. Regarding Offer of Appointment - Second Copy of the Offer of appointment, to be produced at the time of joining in the Bank.
02. पुलिस सत्यापन रिपोर्ट - पुलिस सत्यापन पत्र का प्रथम पृष्ठ पुलिस प्राधिकारी को संबोधित है, जो बैंक अधिकारिक हस्ताक्षरित है। उक्त पत्र पर अभ्यर्थी, अपने निकटस्थ पुलिस थाना/ पुलिस अधीक्षक कार्यालय का नाम लिखें। पुलिस सत्यापन रिपोर्ट की द्वितीय प्रति पर अभ्यर्थी स्वयं के द्वारा अपना नवीनतम फोटो चिपका कर सत्यापित करें। अभ्यर्थी, दोनों पृष्ठों को निकटस्थ पुलिस थाना/पुलिस अधीक्षक कार्यालय में प्रस्तुत करें एवं पत्र प्राप्ति की पावती प्राप्त करें। पुलिस प्राधिकारी से पत्र पावती वाली प्रति बैंक अभिलेख हेतु प्रधान कार्यालय में प्रस्तुत करें।
02. Police Verification Report - First page of the police verification letter is addressed to the Police Authorities which is signed by the Official of the Bank. The candidate has to write name of the nearest police station/ Commissioner's Office on the said letter. On the second page of police verification report candidate has to affix his/her recent photograph duly attested by him/her. Candidates has to submit both the pages to his/her nearest Police Station/ Police Commissioner's office and obtain their acknowledgement of having received the report on photocopy of the same. The acknowledged copy by the police Authority be submitted to his/her Head Office for the Bank's record.
03. मेडिकल रिपोर्ट - अभ्यर्थीगण, जिला सिविल सर्जन/ जिला मेडिकल बोर्ड से मेडिकल रिपोर्ट प्राप्त करें एवं बैंक में प्रथम बार उपस्थित होने पर बैंक अभिलेख हेतु प्रस्तुत करें। सुलभ संदर्भ हेतु मेडिकल रिपोर्ट का प्रारूप संलग्न किया गया है।
03. Medical Report - Candidates has to obtained medical report from Distt. Civil Surgeon/ Distt. Medical Board and submit the same to the Bank at the time of first joining in the Bank. Proforma of medical report enclosed for ready reference.

किसी शंका या जानकारी के लिये प्रधान कार्यालय में दूरभाष नं. 07162-245241 पर सम्पर्क कर सकते हैं।

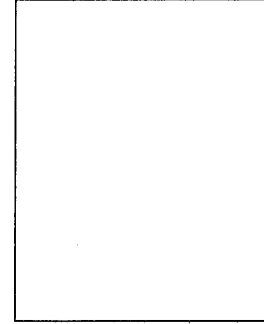
For any doubt or information, may contract in H.O. on telephone no. 07162 - 245241

Office of the .....

Ref. No. ....

Date .....

General Manager HR  
Central Madhya Pradesh Gramin Bank  
Head Office - 854, In front of Maharshi Vidya Mandir,  
Sarra, Nagpur road,  
Chhindwara



Dear Sir,

Reg - History of criminal case/s/conviction against of newly recruited  
Officer Scale I Shri/Smt/Ku.....SO/WO/DO  
Shri.....  
address .....

Ref - Your letter no. .... date .....

We refer to your above communication and inform you that -

I) There is no criminal case pending/ conviction registered against  
Shri/Smt ....., newly recruited Officer Scale I as per  
our record.

OR

II) There is criminal case pending /conviction is registered against  
Shri/Smt....., newly recruited Officer Scale I and thereof  
are as under ( Please furnish detail of criminal case/conviction)

(Strike out whichever not applicable)

Yours faithfully

Signature & seal  
with designation

(To be executed on stamp paper of Rs. 1000/-)

SERVICE BOND

THIS BOND IS EXECUTED AT \_\_\_\_\_ ON \_\_\_\_\_  
DAY OF \_\_\_\_\_ 2018 BY

I. \_\_\_\_\_ Son/daughter/wife of \_\_\_\_\_ age \_\_\_\_\_  
years, residing at \_\_\_\_\_ hereinafter referred to as the  
'EMPLOYEE' (which expression shall include his/her/ heirs, executors, administrators and  
assigns) and

II. (1) \_\_\_\_\_ Son/daughter/wife  
of \_\_\_\_\_ age \_\_\_\_\_ years, residing at \_\_\_\_\_  
\_\_\_\_\_

(2) \_\_\_\_\_ Son/daughter/wife  
of \_\_\_\_\_ age \_\_\_\_\_ years, residing at \_\_\_\_\_  
\_\_\_\_\_

Hereinafter referred to as the 'SURETIES' (which expression shall include both and their respective  
heirs, executors, administrators and assigns)

IN FAVOUR OF CENTRAL MADHYA PRADESH GRAMIN BANK, a body corporate constituted  
under RRB Act 1976 having its Head Office at "Plot no. 854, Sarra, Nagpur Road, Chhindwara, Dist-  
Chhindwara - 480001 Madhya Pradesh" hereinafter referred to as "The Bank" (which expression shall  
include its successors and assigns) for the sum of

Rs. \_\_\_\_\_ (in words \_\_\_\_\_)

WHERE AS :

01. The Bank has vide its letter No. \_\_\_\_\_ dated \_\_\_\_\_ has given  
on Offer of Employment to the Employee herein stipulating the terms and conditions of  
employment. The Employee has unconditionally accepted the Offer and all the terms and  
conditions of the Offer.
02. The date of joining the service and if the Employee leaves the Bank for any reason whatsoever  
before completion of three years there from, he/she will have to make payment of Rs.  
\_\_\_\_\_ (In word \_\_\_\_\_ ) to the Bank.
03. The sureties have undertaken liability as sureties and guaranteed due performance of the said  
bond by the Employee and payment of guaranteed bond amount in case of default by the  
Employee.

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NOW THIS DEED WITNESSETH AND THE EMPLOYEE AND THE SURETIES AGREE, UNDERTAKE AND BIND THEMSELVES AS UNDRE;

01. THAT if the Employee for any reasons whatsoever resigns, discontinues, or abandons the services or leaves the Bank or remains absent un-authorizedly before expiry of three years from the date of joining the service the Employee shall forthwith pay to the Bank the said sum of Rs. \_\_\_\_\_ (In word \_\_\_\_\_ ) on demand, without demur.
02. In case of default by the Employee in due performance of the bond and payment of the said amount, the sureties jointly and severally bind themselves to pay the said amount to the Bank forthwith on demand without demur.
03. The liability of the Employee and the sureties shall be joint and several.

IN WITNESS WHEREOF THE EMPLOYEE AND SURETIES HAVE executed this Bond in favour of the Bank and subscribed their respective hands on \_\_\_\_\_ day of \_\_\_\_\_.

SIGNED AND DELIVERED BY

THE EMPLOYEE HEREIN

SIGNED AND DELIVERED BY

1.

2.

THE SURETIES HEREIN

Medical Report

Name of candidate .....

Address.....

.....

age..... sex..... Identification Marks.....

Signature of the Candidate ..... (to be signed before the Doctor)

part History: Name of the family members suffering from & since when

- 1.
- 2.
- 3.

Hypertension  
Mental diseases  
Asthma  
Skin Diseases  
Tuberculosis  
Leprosy

Cancer  
Cardiac ailment  
Paralysis  
Tumor  
Pleurisy  
Major Accident  
Surgical Operation

General Examination

Built  
Weight  
Pulse  
Nails

Height  
Conjunctive  
tongue

Systematic Examination

BP  
Heart Sound  
Murmurs  
Peripheral circulation  
Abnormal findings  
Respiratory System

Inspection  
Percussion  
Palpitation

Per Abdomen

Operative Scan  
Hornia  
Hydrocele  
Liver  
Spleen  
Any finding

Central Nervous System

Ear, Nose, Throat

Ophthalmic Examination

Eye sight  
Colour blindness  
Squint  
Abnormal findings

Gynecological Examination

M.C.  
Last M.C.  
Obstetric history  
Abnormal findings

Urine Sugar  
Albumin

Advice to candidate for the correction of abnormal findings

Recheck  
Consultant's opinion  
Remark

In my opinion, Mr./Mrs/Miss..... is physically and mentally fit/unfit to join his/her service.

Signature

Name

Qualification

Registered no.

Address

Date

DISTRICT MEDICAL BOARD DISTRICT HOSPITAL .....

MEDICAL - REPORT

DATE .....

Signature of candidates .....

Name of Candidate ..... S/O W/O D/O .....

Post for which applied ..... age..... Department – Central Madhya Pradesh Gramin Bank

Built ..... Nutrition ..... Height ..... cm Weight ..... kg

Identification Marks.....

Chest of expiration ..... cm Chest of inspiration..... cm

Abdominal circle in cm. .... Lymphauompethy .....

Aneamia..... any irregularity.....

Pulse rate ..... HB%..... BP.....

Vascular diseases ..... Lungs .....

skin..... Thyroid glands .....

any mass in abdomen .....

Dental Condition..... Liver..... Splint.....

Piles..... any deformity of limb .....

Any evidence of veneral diseases .....

Eye

Distance vision	RT	LT
Near vision	RT	LT
Colour vision	RT	LT
Any abnormality	RT	LT
Hearing	c.v.s.	

Obstratic History

Female reproductive Organs :

Nervous system .....

Resp. System .....

Any Deformity of muscles and Joints :-

Temporary unfit due to .....

Advice given .....

Declared Fit/Unfit for the post of Officer Scale I

Medical Specialist  
Distt. Medical Board

Asstt. Surgeon  
Distt. Medical Board

Eye Specialist  
Distt. Medical Board

Secretary  
Distt. Medical Board

Chairman  
Distt. Medical Board

## Form of Caste Certificate

1. This is to certify that Shri/Shrimathi\*/Kumari\* ..... son/daughter\* of ..... of village/town\* ..... in District/Division\* ..... of the State/Union Territory\* ..... belongs to the ..... Caste/Tribe\* which is recognised as a Scheduled Caste/Scheduled Tribe under:

\*The Constitution (Scheduled Caste) Order, 1950

\*The Constitution (Scheduled Tribe) Order, 1950

\*The Constitution (Scheduled Castes) (Union Territories) Orders, 1951;

\*The Constitution (Scheduled Tribes) (Union Territories) Orders, 1951;

[as amended by the Scheduled Castes and Scheduled Tribes Lists (Modification) Order, 1956; the Bombay Reorganisation Act, 1960; the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North-Eastern Areas (Reorganisation) Act, 1971, the (Constitution) Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976; the Constitution (Scheduled Tribes) Order (Amendment) Act, 1987; the Constitution (Scheduled Tribes) Order (Amendment) Act, 1991; and the Constitution (Scheduled Tribes) Order Second Amendment Act, 1991]

\* The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956

\* The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amendment by

\* The Scheduled Castes and Scheduled Tribes Orders (amendment) Act, 1976;

\* The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order, 1962;

\* The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962;

\* The Constitution (Pondicherry) Scheduled Castes Order, 1964;

\* The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967;

\* The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968;

\* The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968;

\* The Constitution (Nagaland) Scheduled Tribes Order, 1970;

\* The Constitution (Sikkim) Scheduled Castes Order, 1978;

\* The Constitution (Sikkim) Scheduled Tribes Order, 1978;

\* The Constitution (Jammu and Kashmir) Scheduled Tribes Order, 1989;

\* The Constitution (Scheduled Castes) Orders, (Amendment) Act, 1990

2. Shri/Shrimathi\*/Kumari\* ..... and/or\* his/her\* family ordinarily reside(s) in village/town\* ..... of ..... District/Division\* of the State/Union Territory\* of .....

Signature: .....

Designation: .....

Place ..... State.....  
Union Territory.....

Date .....

Note - The term "Ordinarily resides" used here will have the same meaning as Section 20 of the Representation of the Peoples Act 1950 .

\* Please delete the words which are not applicable



Form of Certificate to be produced in the case of Scheduled Castes/ Scheduled Tribes  
persons who have migrated from one State/Union Territory Administration

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1. This is to certify that Shri/Shrimathi\*/Kumari\* ..... son/daughter\*  
of ..... of village/town\* ..... in  
District/Division\* ..... of the State/Union  
Territory\* ..... belongs to the ..... Caste/Tribe\* which is recognised as a  
Scheduled Caste/Scheduled Tribe under:

- \*The Constitution (Scheduled Caste) Order, 1950
- \*The Constitution (Scheduled Tribe) Order, 1950
- \*The Constitution (Scheduled Castes) (Union Territories) Orders, 1951;
- \*The Constitution (Scheduled Tribes) (Union Territories) Orders, 1951;  
[as amended by the Scheduled Castes and Scheduled Tribes Lists (Modification) Order, 1956; the  
Bombay Reorganisation Act, 1960; the Punjab Reorganisation Act, 1966, the State of Himachal  
Pradesh Act, 1970, the North-Eastern Areas (Reorganisation) Act, 1971, the (Constitution)  
Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976; the Constitution  
(Scheduled Tribes) Order (Amendment) Act, 1987; the Constitution (Scheduled Tribes) Order  
(Amendment) Act, 1991; and the Constitution (Scheduled Tribes) Order Second Amendment Act,  
1991]
- \* The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956
- \* The Constitution (Andaman and Nikobar Islands) Scheduled Tribes Order, 1959 as amendment by
- \* The Scheduled Castes and Scheduled Tribes Orders(amendment) Act, 1976;
- \* The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order, 1962;
- \* The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962;
- \* The Constitution (Pondicherry) Scheduled Castes Order, 1964;
- \* The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967;
- \* The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968;
- \* The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968;
- \* The Constitution (Nagaland) Scheduled Tribes Order, 1970;
- \* The Constitution (Sikkim) Scheduled Castes Order, 1978;
- \* The Constitution (Sikkim) Scheduled Tribes Order, 1978;
- \* The Constitution (Jammu and Kashmir) Scheduled Tribes Order, 1989;
- \* The Constitution (Scheduled Castes) Orders, (Amendment) Act, 1990

2. The certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe Certificate issued to  
Shri/Shrimathi\*/Kumari\* ..... father/mother of  
Shri/Shrimathi\*/Kumari\* ..... of village/town\* .....  
in District/Division\* ..... of the State/Union Territory\* ..... who belong  
to the ..... caste/tribe\* which is recognised as Scheduled Caste/Scheduled Tribe in the  
State/ Union Territory\* ..... issued by the ..... (Name of the  
prescribed authority) vide their No. .... dated .....

Signature: .....

Designation: .....

Place ..... State.....  
Union Territory.....  
Date .....

Note - The term "Ordinarily resides" used here will have the same meaning as Section 20 of the Representation of the  
Peoples Act 1950 .

.....  
\* Please delete the words which are not applicable

**Form of the Certificate to be produced by Other Backward Classes applying for  
appointment to posts under the Government of India**

This is to certify that ..... son/daughter\* of .....  
of village ..... District/Division\* ..... in  
the State ..... belonging to the .....  
community which is recognised as a Backward Class under -

- i) Government of India, Ministry of Welfare, Resolution No. 12011/68/93-BCC(C), dated 10<sup>th</sup> September, 1993 published in the gazette of India, Extraordinary, Part - I, section I, No. 186, dated the 13<sup>th</sup> September, 1993
- ii) Government of India, Ministry of Welfare, Resolution No. 12011/9/93-BCC, dated the 10<sup>th</sup> October, 1994 published in the gazette of India, Extraordinary, Part - I, section I, No. 163, dated the 20<sup>th</sup> October, 1994.
- III) Government of India, Ministry of Welfare, Resolution No. 12011/7/95-BCC, dated the 24<sup>th</sup> May, 1995 published in the gazette of India, Extraordinary, Part - I, section I, No. 88, dated the 25<sup>th</sup> May, 1995.
- IV) Government of India, Ministry of Welfare, Resolution No. 12011/44/96-BCC, dated the 06<sup>th</sup> December, 1996 published in the gazette of India, Extraordinary, Part - I, section I, No. 210, dated the 11<sup>th</sup> December, 1996

Shri ..... and/or\* his family ordinarily reside (s) in the .....  
District/Division\* of the ..... State. This is also to certify that he/she\* does  
not belong to the persons/section (Creamy Layer) mentioned in Column 3 of the Scheduled  
to the Government of India, Department of Personal & Training, O.M.No. 36012/22/93-  
Estt.(SCT) dated 8.9.1993 .

signature  
Name & Designation  
of the issuing authority

Dated

Seal

.....  
\* Strike out whichever is not applicable

NB - (a) The term "Ordinarily resides" used here will have the same meaning as Section 20 of the Representation of the Peoples Act 1950 .

(b) The authorities competent to issue caste certificate are indicated below :-

1. District Magistrate/ Additional District Magistrate/ Collector/ Deputy Commissioner/ Additional Deputy Commissioner/ Deputy Collector/ 1st class Stipendary Magistrate/ Sub Divisional Magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (not below the rank of First Class Stipendary Magistrate) .
2. Chief Presidency Magistrate/ Additional Chief Presidency Magistrate/ Presidency Magistrate
3. Revenue Officer not below the rank of Tehsildar
4. Sub-Divisional Officer of the area where the candidate and/or his family normally resides.

List of authorities competent to issue Caste certificates are indicate below

1. District Magistrate/ Additinal District Magistrate/ Collector/ Deputy Commissioner/ Additional Deputy Commissioner/ Deputy Collector/ 1st class Stipendary Magistrate/ Sub Divisional Magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (not below the rank of First Class Stipendary Magistrate) .
2. Chief Presidency Magistrate/ Additional Chief Presidency Magistrate/ Precidency Magistrate
3. Revenue Officer not below the rank of Tehsildar
4. Sub-Divisional Officer of the area where the candidate and/or his family normally resides.

Note :-

1. In so far as the Scheduled Tribes community of tamilnadu is concerned the certificate given by the Revenue Divisional Officer instead of Tehsildar should only be accepted.
2. Caste certificate issued by Mandal Revenue Officer in Andhra Pradesh may be accepted as they are equivalent to the status of Tehsildar.

अनुसूची - 1  
(विनियम 5(4)(II) देखें)  
वैवाहिक प्रास्थिति की घोषणा

मैं, श्री/श्रीमती/कुमारी ..... पुत्र/पत्नी/पुत्री .....

निम्नानुसार घोषणा करता/करती हूँ

(i) मैं विवाहित / विधुर / विधवा हूँ।

(ii) मैं विवाहित हूँ और मेरे साथ केवल एक जीवित पति या पत्नी है।

(iii) मैंने ऐसे व्यक्ति से उसके पति या पत्नी के जीवित रहते हुए विवाह किया है। मुझे नीचे दिए गए आधार पर छूट मंजूर की जाए।

छूट मंजूर किए जाने के लिए आवेदन संलग्न है।

आधार :-

2. मैं सत्यनिष्ठा से प्रतिज्ञान करता हूँ कि उपर्युक्त घोषणा सही है और मैं समझता हूँ कि मेरी नियुक्ति के पश्चात् घोषणा के गलत पाए जाने की दशा में मैं सेवा से पदच्युत के लिए दायी रहूंगा।

तारीख :

हस्ताक्षर

अनुसूची 2  
(विनियम 18 देखें)  
निष्ठा और गोपनीयता की घोषणा

मैं ..... घोषणा करता/करती हूँ कि मैं .....

बैंक के अधिकारी या कर्मचारी के रूप में और उक्त बैंक में मेरे द्वारा धारित कार्यालय से संबंधित या स्थिति से संबद्ध मुझसे अपेक्षित कर्तव्यों को सत्यनिष्ठा तथा सर्वोत्तम कुशलता से निष्पादित और पूरा करूंगा/करूंगी।

मैं आगे घोषणा करता/करती हूँ कि मैं उक्त बैंक के कार्यों से संबंधित कोई सूचना या उक्त बैंक के साथ डील करने वाले किसी व्यक्ति से संबंधित किसी कार्य के बारे में कोई सूचना उसके लिए विधिक रूप से अपात्र व्यक्ति को न तो प्रगट करूंगा/करूंगी और न ही ऐसा किए जाने के लिए किसी व्यक्ति को निरीक्षण करने के लिए अनुज्ञात करूंगा/करूंगी और न तो उक्त बैंक के अधिकार में किसी बही या इलेक्ट्रानिक्स दस्तावेज और न ही उक्त बैंक के कारोबार से संबंधी या उक्त बैंक के साथ डील करने वाले किसी व्यक्ति के किसी कारोबार का निरीक्षण करने की अनुज्ञा प्रदान करूंगा/करूंगी।

हस्ताक्षर : .....

पूरा नाम : .....

पदनाम : .....

मेरे समक्ष हस्ताक्षरित :-

पूरा नाम : .....

पदनाम : .....

स्थान : .....

तारीख : .....

अनुसूची 3  
(विनियम 73 देखें)  
अधिवास की घोषणा

स्थान : .....

तारीख : .....

मैं, अधोहस्ताक्षरी ..... बैंक की सेवा में नियुक्ति के पश्चात् घोषणा करता/करती

हूँ कि ..... (स्थान) .....

(जिला) मेरा अधिवास है।

1. \* उपर्युक्त स्थान मेरा जन्म स्थान है।

या

\* उपर्युक्त स्थान मेरा जन्म स्थान नहीं है मेरा जन्म स्थान .....

(स्थान) ..... (जिला) .....

किन्तु ..... (स्थान) को निम्नलिखित कारणों से अपना अधिवास

घोषित किया गया है।

.....

.....

हस्ताक्षर : .....

पूरा नाम : .....

पदनाम और नियुक्ति की प्रकृति : .....

नियुक्ति की तारीख : .....

\* जो लागू न हो उसे काट दें।

## अभ्यर्थियों के लिये निर्देश (Instructions for Candidates)

अभ्यर्थी निम्नलिखित दस्तावेज सहित उपस्थित हो।

1	Attested copies of Mark sheets / certificates in support of Educational Qualification; शैक्षणिक योग्यता के समर्थन में अंकसूची/प्रमाण पत्र की सत्यापित प्रति।	2	10 <sup>th</sup> standard examination Mark sheet in support of local language. स्थानीय भाषा के समर्थन में 10वीं की परीक्षा की अंकसूची।
3	Caste / PWD any other related certificate as applicable. जाति/पीडब्ल्यूडी तथा अन्य संबंधित प्रमाणपत्र (जहाँ आवश्यक हो।)	4	Attested copy of certificate of Computer Course, as applicable; कम्प्यूटर कोर्स के प्रमाणपत्र की सत्यापित प्रति(जहाँ आवश्यक हो)
5	Photo identity proof. फोटो परिचय पत्र	6	Attested copy of School leaving certificate or any other document as proof of age acceptable to the Bank. आयु के प्रमाण के लिये शाला को छोड़ने के प्रमाण पत्र की सत्यापित प्रति अथवा बैंक को मान्य अन्य कोई दस्तावेज।
7	Ex-servicemen Candidates who were serving in Defence and had applied under Ex-servicemen category should submit a certificate from the competent authority stating that they have been released/ retired as stated in the the advertisement as applicable. भूतपूर्व सैनिक अभ्यर्थी, जो सेना में कार्यरत थे तथा जिन्होंने भूतपूर्व सैनिक श्रेणी के अन्तर्गत आवेदन किया है, वे विज्ञापन के अनुसार सक्षम प्राधिकारी से इस आशय का प्रमाण पत्र प्रस्तुत करेंगे कि उन्हें भारमुक्त/सेवामुक्त कर दिया गया है। (जहाँ आवश्यक हो।)	8	You will have to produce, if not already produced, at the time of reporting to the Bank, you have to furnish 03 character certificates, out of which 01, must be issued from school/college last attended, remaining 02 from Gazetted officer. यदि आपने पहले प्रस्तुत न किये हों तो, बैंक में उपस्थिति के समय, 03 चरित्र प्रमाण पत्र प्रस्तुत करना होगा। इनमें से 01, जिस स्कूल कालेज में अंतिम शिक्षा ली है एवं शेष 02, राजपत्रित अधिकारी से जारी होना चाहिये।
9	Attested English version of those certificates, which are in vernacular language. जो प्रमाण पत्र हिन्दी अथवा अंग्रेजी भाषा के अतिरिक्त किसी अन्य भाषा में हैं उनका अनुप्रमाणित अंग्रेजी रूप।	10	Testimonials from your present/previous employers & Service Certificate(s) in respect of your present/previous employment, if any. वर्तमान/पूर्व नियोक्ता से प्रशंसा पत्र और आपकी पूर्व सेवा के संबंध में सेवा प्रमाण पत्र, यदि कोई हो
11	Service bond. सेवा बॉन्ड (निर्धारित प्रारूप में)	12	Any other relevant document अन्य कोई संबंधित दस्तावेज
13	Medical Board fitness certificate मेडिकल बोर्ड का फिटनेस प्रमाण पत्र	14	Experience certificate as applicable. अनुभव प्रमाण पत्र (जहाँ आवश्यक हो)।
15	Follow the instructions, of Provisional Appointment letter. प्रोविजनल नियुक्ति प्रस्ताव में दिये गये निर्देशों का अनुसरण करें।	16	

**BIO-DATA****प्रारूप**

1	सेवायुक्त का नाम																									
2	पिता/पति का नाम																									
3	वर्तमान पता																									
4	स्थायी पता (गृह निवास) पिन कोड सहित																									
5	संपर्क हेतु दूरभाष/मोबाईल नंबर																									
6	वैवाहिक स्थिति	विवाहित      अविवाहित      आयु																								
7	परिवार के आश्रित सदस्य (पत्नी/पति, बच्चे, माता-पिता, भाई-बहन) का विवरण।  भाई-बहन आश्रित होने की स्थिति में विकलांगता का प्रतिशत.....	<b>आश्रित सदस्य का विवरण</b> <table border="1"><thead><tr><th>नाम</th><th>आयु</th><th>संबंध</th><th>वार्षिक आय</th></tr></thead><tbody><tr><td>1</td><td></td><td></td><td></td></tr><tr><td>2</td><td></td><td></td><td></td></tr><tr><td>3</td><td></td><td></td><td></td></tr><tr><td>4</td><td></td><td></td><td></td></tr><tr><td>5</td><td></td><td></td><td></td></tr></tbody></table>	नाम	आयु	संबंध	वार्षिक आय	1				2				3				4				5			
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8	शैक्षणिक योग्यता																									
9	विशेष योग्यता (यदि कोई हो तो)																									
10	पूर्व में कोई नियोजन में कार्यरत थे यदि हाँ तो विवरण दें																									
	1. नियोक्ता का नाम																									
	2. पद का नाम																									
	3. वेतन विवरण																									
11	अन्य विवरण (यदि कोई हो तो)																									

मैं घोषणा करता हूँ कि मेरे द्वारा दी गई उपरोक्तानुसार जानकारी पूर्णतः सत्य है।

दिनांक

हस्ताक्षर

नाम - .....