Latest colour passport size photograph of the candidate

## **REVISED ATTESTATION FORM**

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

Name of the Department		Name of the Head of Department	
1. (a) Name	in full (Capital letters only)wit led/dropped at any stage any page 2.	h aliases, if any. Please Indic	ate if you have
SURNAME			
NAME			
	(b) Designation of the candidat Ex-servicemen quota/comp (Enclose supporting co		•
(i)	Designation		
(ii)	Place of working		
(iii)	Date of Entry into Service or Date of Appointment		
(iv)	Direct Recruitment	Ex-Servicemen	Compassionate
2	Details of Address	a. Present	b. Permanent
Hou	se /Apartment/Flat No.		
Nan	ne of the Apartment		
Lan	e Name		
Stre	et & Road		
Villa	age		
Man	dal/Taluk		
Tow	n/City		
Dist	crict		
State			

		Mobile				line Residence STD Code		
Contac	t Pho	one Number			(	(	~	
Pa tha	akista at Doi	nally a resident on, the address in minion and the cation to Indian U	n late					
3 Particulars of places where you have resided during the <i>preceding five years</i> from the date of filling up of Attestation Form.								
		From	То		lential Address in full	,	Police Station	
		(Month/year)	(Month/year)		e/Apartment/Flat Nur nent /Complex/ Lane/		and District.	
					nd Road, Village, Ma			
				,	District / City)			
	1							
	2							
	3							
	4							
	5							
4.)	Fathe	er's details						
a	) Na	me in full with a	aliases, if any					
b	) Pro	ofession						
c) If in service, give designation and Official address								
d) Present Postal address (if dead,				House No	)			
	give	e last address)		Lane Nan	ne			
				Street & I				
				Village/N	Iandal			
				Dist State				
				PIN Code				
				TIV Code	,			
e) Permanent House address House No								
				Lane Nan				
				Street & I				
ν Γ S				Village/N	Iandal	,		
				Dist				
				State				
				PIN Code	;			

5. (i) Nationality of a) Father							
b) Mothe	r						
c) Wife/	Husband						
(ii) Place of birth	of Wife/Husband						
6. a) Date of birth o	f the applicant						
b) Present age							
c) Age at SSC/M	[atriculation						
7. a) Place of birth,	District and State						
b) District and St belong	ate to which you						
8. a) Religion							
b) Are you a men	mber of Scheduled Ca	ste/Scl	neduled Tribe	/ Backward Class?	)		
Scheduled Cas			ed Tribe	Backward		ss	
Please Specia	fy the class/Tribe Grad	de A,B	,C,D, &E				
9 Educational Qua	lifications showing pl	laces o	f education w	ith years in school	s and	d colleges since	15 <sup>th</sup>
your of age (Pla	ease enclose certified	d copie	es of study c	ertificates and in	dicat	e whether stud	ly is
regular or distan	ce/correspondence)	_	-	-	1		
	Name of the	1 C 11	Date of	Date of leaving		Examination assed with Reg.	Police
Course	school/College wit address (village/Ma		entering (mention	(Mention Month & Year)		o. etc (Name of	Station and
004150	District/City)		month &	Monui & Tear)		group i.e. Inter/	District.
	District City)		year)		De	egree/ Diploma PG, etc)	District.
1.SSC/						10,00	
Matriculation							
2.Intermediate/ Diploma							
3.Graduation/							
Professional							
Course							
4.Post Graduation							
5.Any other qualification							
10. If you have at an	y time been employed,	give de	etails. (Please e	enclose certified cop	oies of	f the documents)	
Designation of post	D	ui o d		Full Address of t		Have you been a	
held or description	Pei	riod		Office, Firm or	r	any time dismissed /	
of work	From		То	Institution		removed from service / resigned	d to
		1		1		service / resigne	u tO
						the post? If so,	

the conviction, sentences and dete	ention should be given.	
ame and complete address of two response referees to whom you are known.		
House /Apartment/Flat No.	Referee-1	Referee-2
House / Apartmeno Plat No.		
Name of the Apartment/complex		
Lane Name		
Street & Road		
Village		
Mandal/Taluk		
Town/City		
District		
State		221
Pincode		
		[

## **DECLARATION SHOULD BE SIGNED BY THE CANDIDATE**

- 1. I hereby 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 the candidate
Place:	

## CERTIFICATE TO BE SIGNED BY A GAZETTED OFFICER OR MEMBER OF LEGISLATURE OR OTHER AUTHORITY AS PRESCRIBED BY THE APPOINTING AUTHORITY

Cer	rtified that I have	known Sri / Smt /Kum	
		Son/Daugher/Wife of	for the
last	years	months and to the best of knowledge and belief, th	e particulars
furnished b	by him/her are correct.		
		(Signature)	1
		Name & Designation v	
Date:			
Place:			

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