



भारत सरकार / Govt of India
वित्त मंत्रालय / Ministry of Finance
राजस्व विभाग / Dept of Revenue



दूरभाष / Telephone: 25268925
फैक्स / Fax : 25222548
ईमेल/Email : cuschn-estt@gov.in

प्रधान आयुक्त सीमा शुल्क का कार्यालय (सामान्य)
OFFICE OF THE PRINCIPAL COMMISSIONER OF CUSTOMS (GENERAL)
चेन्नै सीमा शुल्क क्षेत्र
CHENNAI CUSTOMS ZONE
सीमा शुल्क भवन, नं.60, राजाजी सालै, चेन्नै 600 001.
CUSTOM HOUSE, NO.60, RAJAJI SALAI, CHENNAI 600 001.

फा.सं./F.No. II/(3)/APPT/207/2023-ESTT

दिनांक/DATE: 01.09.2023

To

The Candidates of SSC CGLE-2022 (As per the Enclosed list)

Sub.: Establishment – Chennai Custom House – Combined Graduate Level Examination, 2022 to the post of Inspector (Preventive Officer & Examiner) – Intimation of date and venue to conduct the Physical Standards & Test and Document Verification – Reg.

* * * * *

I am directed to say that on the basis of results of Combined Graduate Level Examination, 2022, you have been recommended by the Staff Selection Commission for appointment as Inspector (Preventive Officer & Examiner) in this Custom House, Chennai.

2. As per G.S.R. 1172(E).—dated 26.12.2016, you are required to pass physical test and possess physical standard as prescribed below, for appointment to the grade of Inspector (Preventive Officer) of Customs.

	Physical Standards (Minimum)	Physical Test
For Male Candidate	Height: 157.5 cms. <i>(relaxable by 5cms in the case of Garhwalis, Assamees, Gorkhas and members of Scheduled Tribes)</i>	Walking: 1600 meters in 15 minutes
	Chest: 81 cms <i>(fully expanded with minimum expansion of 5 cms)</i>	Cycling: 8 Kms in 30 Minutes
For Female Candidate	Height: 152 cms. Weight: 48 Kgs <i>(relaxable by 2.5cms and weight relaxable by 2 Kgs in the case of Garhwalis, Assamees, Gorkhas and members of Scheduled Tribes)</i>	Walking: 1 Km. in 20 minutes
		Cycling: 3 Kms in 25 Minutes

3. In this regard, you are directed to appear for Physical Standards / Test **to be held on 12.09.2023 (Tuesday) at 07.00 A.M. without fail at University Union Grounds, Spur Tank Road, Chetpet, Chennai-600031 followed by Document verification at Club Hall, 5th Floor, Annex Building, Custom House, Chennai-600001.** You are requested to come with sports shoes for the Physical Test.

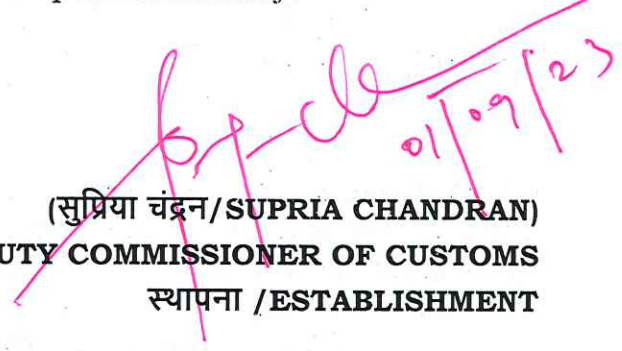
4. You have to download the Attestation form from https://ssc.nic.in/Downloads/portal/english/Attestation_Form.pdf and submit the duly filled **in triplicate** at the time of physical test to the undersigned without fail.

It is hereby informed that you are directed to produce the following documents (**in original**) along with one set of photocopy (Self Attested) at the time of Document Verification:

- a) Matriculation / High School Certificate for the proof of Date of Birth.
- b) Academic Certificates in support of Educational Qualification.
- c) Original Caste / Community Certificate in case of SC/ST/OBC in the prescribed format along with the photocopies.
- d) Original Income and Assets Certificate in case of Economically Weaker Sections in the prescribed format along with photocopies.
- e) Certificate in case of person with disabilities (Divyangjan) candidate.
- f) Identity certificate duly attested from three different Gazetted Officers who have known the candidate for a minimum of two years .(Two sets)
- g) Character Certificate duly signed and attested from two different Gazetted Officers who have known the candidate for a minimum of two years.(Two sets)
- h) Certificate of Fitness from a physician not below the rank of a Civil Surgeon or a District Medical Officer or a Medical Officer of equivalent status. Female candidates should get the certificate from a female physician not below the rank of a Civil Surgeon or a District Medical Officer or a Medical Officer of equivalent status. The CMO's concerned are also requested to take up the medical examination of the candidates concern on the strength of this letter. In case, any other authority letter is required by the office of medical authority concern, the undersigned may be contacted through email cuschnestt@gov.in
- i) Candidates are also required to produce a certificate to the effect that the candidate is "**free from colour blindness**" from a physician not below the rank of a Civil Surgeon.
- j) NOC from current employer in case the candidate is employed in any of the offices under the Central Government / State Government.
- k) Discharge Certificate in case of Ex - Servicemen.
- l) Aadhar Card and PAN card.
- m) The attestation Form, **in triplicate**, may be duly filled in all respects (by hand only) and produced at the time of document verification without fail.
- n) 3 Sets of colour photographs of size 5cm x 7cm to be pasted on the Attestation Forms.

5. It is intimated that Physical Test and Document Verification may take 2-3 working days. All the necessary expenses and arrangement regarding boarding and lodging have to be borne by yourself. *The intimation for Document Verification and Physical/medical tests is issued based on Zonal Allocation published on CBIC website and further process is subject to verification of dossiers by CCA.*

This is issued with the approval of the Competent Authority.


(सुप्रिया चंद्रन/SUPRIA CHANDRAN)
उपायुक्त सीमा शुल्क / DEPUTY COMMISSIONER OF CUSTOMS
स्थापना / ESTABLISHMENT

Encl: As above;

ANNEXURE

To letter issued in F.NoII/(3)/APPT/207/2023-ESTT dated 01.09.2023

List of Examiners allocated to Chennai Customs Zone through SSC-CGLE-2022			
Sl.NO	Name of the Candidate	Roll No	Date of Birth
1	MENDU NAGA SAI GOPAL	8008015112	31-08-1995
2	KOTA DEEPAK	8601047503	25-06-1993
3	GAURAV SINGH PUNDIR	1404004136	23-08-1992
4	SYAMALA CHOLASREE	8601073040	10-08-1998
5	PALURI AMAR SIVA SANTOSH	2209013528	14-05-1995
6	NEELAKANTAM KHYATHI SURENDRA	8011001781	15-08-1998
7	CHENCHIREDDY DIVYA SAINATH REDDY	8601009007	05-07-1999
8	PATHI AKHIL REDDY	8010001972	27-04-1998
9	YEDDULA CHARAN KUMAR REDDY	8601031120	15-04-1999
10	KUMAR NAGA SRINIVASULU REDDY	8006007131	19-01-2000
11	DASARI HEMANTH	8008016301	16-05-1994
12	ARAVIND VATHSAN R	8208007733	09-02-1994
13	BASIREDDY HARSHA VARDHAN REDDY	8001007635	29-08-2000
14	VAJRALA VEERANJANEYA REDDY	8008018612	30-10-1995
15	NALLURI NAGA SAI BHARAT	8601057421	19-08-1996
16	KANDAGADDALA HARI KRISHNA	8003010901	09-11-1998
17	AKSHINTALA KIRAN	8201034303	13-08-1992
18	KAVERIPAKAM VIJAYAPHANI	8601005828	21-08-1997
19	PERECHERLA VENKATA LALITH	8006005999	15-07-2000
20	GOTTUMUKKALA PAVAN KUMAR	8601077699	24-04-1999
21	PALLI GOUTHAM REDDY	8003010248	25-05-2000
22	SHIVAKOTI VENKATASAIDEEP	8601010483	16-03-1997
23	TADIPARTHY BAPU SANTOSH REDDY	8601038370	17-05-1995
24	NAVEEN KATHRIKI	8601048024	30-03-1995
25	DASA UDAY BHASKAR	8003018032	15-07-1998
26	BALAJI R S	8206004401	27-07-1996
27	YOGESH DAHIYA	2201111015	05-03-1998
28	D VENKATA SAI TEJA	8601057468	01-10-1992
29	AAYUSH SAMADHIYA	6001034415	06-10-2001
30	KOVVURI SAI SATYA VAMSI BHARGAV RED	2201242205	22-10-1997
31	MEDAPATI NAGENDRA REDDY	8004008524	12-07-1992
32	KINGSHUK DATTA	4410100316	06-05-1994
33	PASUPULETI VENKATESWARLU	8601034113	15-10-1992
34	BUDDHA NAVEEN KUMAR	8201017518	11-03-1996
35	NIKHIL SIDDHARTH	3205032017	07-03-2001
36	PONNADA RATNA KUMAR	8006000924	21-08-1996
37	KOUSHIK REDDY MENDU	8601023282	18-01-2000
38	KALLURI KRISHNA	8601004473	28-04-2001
39	ARVIND KUMAR	2201164023	01-07-1994
40	CHETAN PANDEY	2003016088	09-06-1999
41	GOKUL GANDHI M	8207000411	20-12-1996
42	MADDI ANJALI	8601025875	30-09-1994
43	VARRA MADHAVA REDDY	8006000986	15-04-1998
44	NIKITA KADIYAN	2201268063	11-07-1997
45	SOURAV MUDI	4417001308	22-12-1994

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Sl.NO	Name of the Candidate	Roll No	Date of Birth
46	GANJI DURGARAO	8601064520	12-05-1997
47	ASHUTOSH KUMAR	8201013590	04-11-1993
48	DUDDU LOKESH VENKATARATNA SAIPRASAN	8008003117	27-04-1998
49	MURUKUTI VENKAT VIJAY KUMAR REDDY	8601017072	27-04-1999
50	POTHIREDDY RAJYA LAKSHMI	8601075062	10-05-1997
51	PARTH SINGH	3205037970	21-01-1999
52	CHAMA VENKATA MANJUNATHA REDDY	8601017521	20-06-1995
53	ANKIT PAUL	4410022735	19-05-1998
54	AMBATI SATYA PRAKASH	8201047496	28-03-1994
55	MEKALA VAMSHI KRISHNA	8601048601	29-06-1994
56	PATHURI HEMANTH	8601034888	27-08-1999
57	DONTHU VENKATA LAKSHMAN	8011004946	06-08-1998
58	VIGNESH V	8201035265	04-12-1998
59	PASUMARTHI CHANDRA VAMSI	3010068987	08-07-1996
60	MUTYALA S L KISHORE	8007016101	06-12-1996
61	E K ELANGO VAN	8006004626	11-03-1998
62	KATAM LAVA KUMAR	8201036788	10-06-1996
63	BANDI NARAPPA	8601054889	19-05-1997
64	SHYAM PRANESH	8202012857	31-03-1999
65	BURLA GAGAN KUMAR	8001012096	07-06-1996
66	SASMITHA P	8205000267	12-07-1999
67	G SATHYA	8206015184	05-10-1998
68	AVINASH	2201192757	10-12-1993
69	SORRA HARISH KUMAR	8601008754	25-05-1995
70	VENKATA SURYA GANESH M	8007024363	27-04-1989
71	MANI DEEP SUVVARI	8007012952	03-03-1997
72	KAUDAGANI NAGARAJU	8603009228	18-06-1994
73	CHRISTO JAMES S	8206004118	20-04-1999
74	JAMI SUBRAHMANYAM TEJA	8012002958	02-08-2000
75	UTKARSH ANAND	2201218684	11-07-1999
76	MALLENA JEEVANA RAO	8007001775	07-07-1997
77	K RAKESH	8601010416	13-06-1996
78	RAPARTHI VARUN KUMAR	9001002221	19-06-1993
79	ALOK KUMAR SINGH	3010085152	20-01-1992
80	SARAVANAN P	8208008025	03-11-1998
81	MUMMADI RAVITEJA REDDY	8006001146	31-10-1997
82	SATISH KUMAR BADDIRI	8007030116	28-03-1996
83	KUNA SATYA SREE	8601047152	17-06-2000
84	SUBHANKAR SIKDAR	4410053325	30-12-2001
85	RAUBINS KUMAR	8204005796	10-03-1999
86	PRITAM PAL	4410076446	27-06-1996
87	SAKALA SHANMUKHA SRIKANTH	8012003597	06-05-1995
88	DEVENDRA KUMAR	3001039818	12-05-1999
89	ADITYA RANJAN	4205036535	23-06-1997
90	KALWAKURTHY SHARATH CHANDRA	8007019007	28-02-1994

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Sl.NO	Name of the Candidate	Roll No	Date of Birth
91	KOLUPAKA SAI VENKATA SEK HAR	4410024352	20-02-1996
92	LANKE SAI SRINIVAS	8008001771	19-01-1998
93	MUGESH A	8601003465	16-08-1999
94	MANISH KUMAR	5401002861	25-07-1995
95	NAVEEN YADAV	2201260133	18-06-1997
96	PIYUSH KATEWA	2201062004	14-07-1997
97	AMAN KUMAR MANDAL	4205027185	14-11-1998
98	SANGA SURESH	8201047616	30-07-1990
99	HARENDRA KUMAR	2201298209	06-07-1997
100	RAKESH	2201052010	09-05-1993
101	SHIVAM KAUSHAL	3010117918	27-03-2001
102	PONALA PAVAN KUMAR	8601028594	18-07-2000
103	MAMILLAPALLI SASI GOWTHAM	8008025668	19-08-1998
104	BALWAN SINGH	2201043451	10-04-1996
105	MANISH KUMAR	2201331172	28-06-1998
106	MAHENDHAR SOLLA	8603007022	03-11-1992
107	MADHA GEETHA	8601013737	24-04-1995
108	SADANAND YADAV	3013005127	02-05-1995
109	SHIVAM YADAV	2201089651	04-03-2000
110	DEEPAK KUMAR	4205046852	15-07-1997
111	DEEPAK YADAV	2201343699	22-12-1993
112	RAJ NARAYAN SINGH	5401005245	10-04-1996
113	VIPUL SAVITA	9001016313	10-07-1998
114	HITESH CHABARWAL	7208032064	09-09-1993
115	RAMNARAYAN	2404007896	13-07-1999
116	ROHIT RAJ	4417010632	03-03-2000
117	BHAIRA RAM DEG	2404001966	10-05-1998
118	TRIBHUWAN KUMAR	3209005840	09-07-1998
119	THOGATA MADHU BABU	5105036569	28-04-1993
120	MYLARSETTI SAI KUMAR	8601071156	07-06-1997
121	CHUKKABOTTU MANIKANTA	8601079681	08-06-1997
122	SHUBHAM SHARMA	2006007799	02-01-1996
123	AMALLADINNE NAGARAGHAVENDRA	8003020161	14-03-1994
124	ANMOL KUMAR TIWARI	3009052514	13-09-1997
125	ABHIJEET MISHRA	3013084851	20-09-1994
126	TELUKUNTLA NAGA TEJA	8008010308	05-03-1998
127	KASUKURTHI NAVA TEJ	8011002486	17-11-1996
128	SHIVENDRA KUMAR SINGH	3010117603	15-12-1997
129	RAHUL RAJ	3207004713	03-11-1999
130	KESHAW ANAND	2201167830	04-02-1998
131	SHIVAM PANDEY	3013145975	02-09-1998
132	THOTA NAVEENKUMAR	8004005137	22-08-1997
133	SANDEEP NEMANI	8009008567	21-08-1996
134	SONTHENA PRUDHVI RAJ	8007006867	28-12-1994
135	DONGRE PAVAN KALYAN	8008001069	30-07-1996

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Sl.NO	Name of the Candidate	Roll No	Date of Birth
136	PREETHAM H N	7204005126	15-04-1992
137	PALAKURTHY SAIKUMAR	8601034669	10-01-1999
138	RUPAM MANDAL	4410068401	31-01-1993
139	RAJDEEP ROY	4410080482	12-08-1995
140	AMBATI SREE CHARAN	8601026158	09-12-1998
141	DEBJYOTI SAHA	4410065931	26-06-1996
142	BUKYA VINOD	8601065479	17-05-1997
143	CHAYAN DAS	4410003996	03-07-1995
144	AARUSH	1403001350	20-03-1996
145	ATLURI RAJEEV	8011000083	25-05-1991
146	GOSALA SOWMYA SHIREEN	8008011188	12-02-1994
147	SUKANTA BISWAS	4410018592	01-01-1994
148	PRONOJIT SAHA	4410113456	09-01-1995
149	PULIVARTHI PRAVEEN KUMAR	8008002161	17-05-1996
150	MATTEY CHANDRA SEKHAR	8601031336	28-04-1999
151	SUDIP SAHA	4410104156	06-10-1995
152	KARRA RAVI TEJA	8601077303	20-01-1993
153	CHANDERJIT	1004003262	27-12-1995
154	RAHUL SINGH	2201126019	27-02-1993
155	JAI SINGH MEENA	2002005305	14-03-1993
156	LAKHAN LAL MEENA	1402001819	24-09-1995
157	GUGULOTHU JHANSI LAKSHMI	8601018556	14-01-1997
158	BHAVANA DAUNWAT	2405100670	14-06-1995
159	LAVUDI NARESH	8601016301	24-06-1995
160	SATAHA SINGH MEENA	2201067843	16-06-1995
161	CHETAN ANAND MEENA	2405108933	30-05-1991
162	SONU KUMAR MEENA	2405072504	01-07-2000
163	PARAS KUMAR MEENA	2201100843	09-06-2000
164	NARENDRA KUMAR MEENA	2405050485	03-03-1998
165	A SANGEETH	8202002963	12-07-1999
166	SUJAN ROY	4404011846	09-11-1990

ATTESTATION FORM

WARNING : 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 GOVT.

Affix signed passport size (5 cm x 7 cm copy of recent photograph)

2. If detained, arrested, prosecuted, bound down, fined, convicted, debarred, acquitted, etc. Subsequent to the completion and submission of this form,, the details of communicated immediately to the authorities to whom the attestation form has been sent earlier, falling which it will be deemed to be a suppression of factual information.
3. If the fact that false information has been furnished in the Attestation Form ,comes to notice at any time during the service of a person, his services would be liable to be terminated.

1.	Name in full (in block capitals letters) with aliases, if any (Place indicate if you have added or dropped in any stage any part of your name of surname.	
2.	Present address in full (i.e. Village, Thana and Distt. Or House No., Lane / Street Road and Town)	
3.	(a) Home address in full (i.e. Vill., Thana and Distt. Or House No., Lane / Street / Road and Town have of Distt. Hqr.	
	(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. Particulars of places (with period of residence) 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 attaining the age of 21 years should be given.

From	To	Residential address in full (i.e. Village, Thana & District or House No. & Street / Road and Town	Name of the District Hqtr., of the place mentioned in the preceding column

5.	Name (in full & aliases, if any)	Nationality (by Birth & or by domicile)	Place of birth	Occupation (if employed give designation & official address.)	Present postal address (if dead, give last Address)	Permanent Home Address
i) Father (Name in Full) ii) Mother iii) Wife/Husband iv) Brother(s) v) Sister(s)						

5. (a) Information to be furnished with regard to sons and / or daughters in case they are studying / living in a foreign country.				
Name which (By Birth and / Or by Domicile)	Nationality	Place of Birth	Country in which studying / studying / living with Full Address	Date from which Studying / Living in the country mentioned in the previous column

6. Nationality :

7. (a) Date of Birth :
 (b) Present Age :

11. (a) Are you holding or have any time held an appointment under the Central Govt. or State Govt. or a quasi-Govt. body or an Autonomous body or a public undertaking, or a private firm or institution? If so, give full particulars with dates of employment up to date				
Period		Designation, emoluments & Nature of employment	Full name / address of	Reasons for leaving previous service
From	To			

(b) If the previous employment was under the Govt. of India / State Govt./an undertaking owned or Controlled by the Govt. of India or a State Govt. an Autonomous Body / University / Local Body, if you had left service on giving one month's notice under Rule 5 of the Central Service (temporary service) Rules 1965 or any similar corresponding rules or where any disciplinary proceeding framed against you, or had you been called upon to explain your conduct in any matter at the time you give notice of termination of service or at a subsequent date (s) before your service.

12. (a) Have you ever been arrested ? Yes/No
- (b) Have you ever been prosecuted? Yes/No
- (c) Have you ever been kept under detention? Yes/No
- (d) Have you ever been bound down? Yes/No
- (e) Have you ever been fined by a Court of Law? Yes/No
- (f) Have you ever been convicted by a Court of law for any offence ? Yes/No
- (g) Gave you ever been debarred from any Examination or restricted 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 examination / selection? Yes/No
- (i) Is any case pending against you in any Court of Law at the time of filling up this Attestation Form ? Yes/No
- (j) Is any case pending against you in any University or any other educational authority/institution at the Yes/No

time of filling up this Attestation Form ?

- (k) Whether discharged / expelled / withdrawn Yes/No
From any training / institution under the
Government or otherwise ?
- (ii) If the answer to any of the above mentioned question is “Yes” (give full particulars of the case / arrest / detention / fine / conviction / 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.

NOTE: 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.

13. Name of two responsible persons of your locality or two references to whom you are known.

1.

2.

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might impair my fitness for employment under Government.

Signature of the Candidate

Place:

Date :

IDENTITY CERTIFICATE

(Certificate to be signed by any of the following)

- i. Gazetted Officer of Central Government or State Govt.
- ii. Members of Parliament or State Legislative belonging to the constituency where the candidate or his parent / guardians ordinarily resident.
- iii. Sub-Divisional Magistrate /Officers.
- iv. Tehsildars or Naib Deputy Tehsildars authorized to exercise magisterial power .
- v. Principal / Headmaster of the recognized School/College/Institution where the candidate studied last.
- vi. Post Masters
- vii. Block Development Officer
- viii. Panchayat Inspectors.

Certified that I have known Shri / Smt./Kum._____

_____ Son / Daughter of Shri_____

_____for the last _____Years_____ months

and that to the best of my knowledge and belief the particulars furnished by him / her are correct.

Signature
Designation or Status & Address

Place:

Date :

TO BE FILLED BY OFFICE

- i) Name, Designation and Full Address of the appointment authority
- ii) Post for which the candidate is being considered.

CERTIFICATE OF CHARACTER

(FOR CLASS II SERVICES)

Certified that I have known S/Shri/Smt/Ms
.....Son/ Daughter of Shri/Smt.....
.....for the lastYears
.....Months and that to the best of knowledge and belief he/She bears reputable
charcter and has no antecedents which render him/her unsuitable for Government
employment.

2. S/Shri/Smt/Ms.....is
not related to me.

Place: _____

Signature _____

Date: _____

Designation: _____

*(to be attested by Stipendary I class Executive
Magistrate, District Magistrate or Sub Divisional
Magistrate)

//ATTESTED//

Place: _____

Signature _____

Date: _____

Designation: _____

(Attesting Authority)

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 किसी अन्य बुखार, ग्रंथियों की वृद्धि या पीप आना, रक्त का थूकना, अस्थमा, 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 संबंधों स्कारफुला का खपत, गठिया, दमा, फिट्स, 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 होरवौसनेस्स के किसी 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

(कृपया पृष्ठ पलटिए/ P.T.O.)

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 है ।

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 विकलांगता 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:

सील सहित चिकित्सा अधिकारी का हस्ताक्षर

स्थान / Place:

SIGNATURE OF MEDICAL OFFICER WITH SEAL

कार्यालय सील / Office Seal

नोट: - उम्मीदवार ऊपर 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.

चिकित्सा प्रमाण पत्र
MEDICAL CERTIFICATE

मैं इसके द्वारा प्रमाणित करता हूँ कि मैंनेविभाग में रोजगार के लिए एक उम्मीदवार की जांच की है, और को छोड़कर किसी भी रोग (संचारी या अन्यथा) संवैधानिक कमजोरी, या दुर्बलता का खोज नहीं कर सकता, मैं इसको कार्यालय में रोजगार के लिए एक अयोग्यता नहीं मानता हूँ। उसकी उम्र उसके स्वयं के बयान के अनुसारसाल है और आकार से करीबसाल है।

I hereby certify that, I have examineda candidate for employment in theDepartment, and cannot discover that has any disease (communicable or otherwise) constitutional weakness, or infirmity exceptI do not consider this a disqualification for employment in the office of theHis /her age is according to his/her own statementyears and by appearance aboutyears.

दिनांक / Date:

स्थान / Place:

कार्यालय सील / Office Seal

सील सहित चिकित्सा अधिकारी का हस्ताक्षर

Signature of the Medical Officer with seal

MEDICAL CERTIFICATE TO BE FURNISHED FOR APPOINTMENT TO THE POST OF INSPECTOR

Name of the Candidate		
Roll No.		
Rank No.		
Signature of the Candidate		
Left Thumb Impression		
		(Photo to be attested by the Medical Officer)

FREE FROM COLOUR BLINDNESS CERTIFICATE

Certified that I have examined Mr/Ms. _____
whose signature is appended above, and certify that his/her colour vision is Normal/Defective
(Strike of which is not applicable)

(Seal of the Medical Officer)		Signature of Medical Officer	
		Name	
Place		Reg.No.	
Date			