

आवश्यक सूचना

आर.आर.वी . अजमेर से CEN-03/2018 के रिप्लेसमेंट पैनल से चयनित JE(WORKS) (लेवल-06) के उम्मीदवारों की सूची निम्नानुसार है

Sr. n.	Candidate Name	ROLL NO.	DESIGNATION	Reporting Date
1	ANKUR SHARMA	123812291251174	JE (WORKS)	17.12.2021

उपरोक्त अभ्यर्थी दिनांक 17.12.2021 (समय प्रातः 10.00 बजे) को मण्डल रेल प्रबन्धक कार्यालय भोपाल के भर्ती अनुभाग में समस्त मूल शैक्षणिक दस्तावेज, जाति एवं 15 फोटो पासपोर्ट साइज़, जाति एवं शैक्षणिक प्रमाण पत्र का ऑनलाइन वेरिफिकेशन अवश्य लेकर उपस्थित हों ताकि सेवापंजिका एवं अंगूठा परीक्षण उपरांत कार्यालय में नियुक्ति की कार्यवाही पूर्ण की जा सके।

स्थान-भोपाल

दिनांक -09/12/2021


9/12/2021
(अजय कुमार दीक्षित)
वरि. मण्डल कार्मिक अधिकारी
भोपाल

आवश्यक निर्देश

1 साक्ष्यांकन फार्म की एक प्रति भेजी जा रही है जिसकी पहले दो कापी कराएं इस तरह तीन प्रतियों में पासपोर्ट साइज का फोटो लगाकर उसे यथा विधि पूर्ण कर फोटो एवं पहचान प्रमाण पत्र एक ही राजपत्रित अधिकारी/फार्म पर दर्शाए गए संबंधित अधिकारी से सत्यापित कराएं ।

2 चरित्र प्रमाण पत्र के फार्म ए एवं बी भेजे जा रहे हैं । फार्म ए अंतिम शिक्षा के हेड ऑफ डिपार्टमेंट द्वारा जारी किया गया हो एवं उक्त चरित्र प्रमाण पत्र प्रथम श्रेणी एकजीक्यूटिव मजिस्ट्रेट/एस.डी.एम./तहसीलदार द्वारा प्रति हस्ताक्षरित होना चाहिए । यदि आप सेवारत है तो फार्म बी में भी नियोक्ता के द्वारा जारी किया गया हो जो दो राजपत्रित अधिकारी द्वारा सत्यापित हो । यदि सेवारत नहीं हैं तो प्राचार्य/दो राजपत्रित अधिकारी द्वारा सत्यापित हो ।

3 शपथ पत्र/घोषणा पत्र 100/- के नॉन ज्यूडिसियल स्टाम्प पेपर पर एवं नोटरी करवाकर लाएं ।

4 बांड फार्म में फार्म ऑफ एग्रीमेंट पर 100/- एवं डीड ऑफ इंडेमिनिटी पर 25/- का नॉन ज्यूडिसियल स्पेशल एडरेसिव स्टैम्प लगाना आवश्यक है । इसे पूर्ण कर बांड फार्म पर एक रेल कर्मचारी/शासकीय कर्मचारी की श्योरिटी लेना है जिसका वेतनमान 9300-34800 ग्रेड पे 4200 या अधिक हो तथा उक्त ग्रेड पे से कम न हो एवं श्रम भुगतान नियम से शासित हो एवं कम से कम सेवा पांच वर्ष शेष होना आवश्यक है । दिए गए प्रोफार्मा से भिन्न स्टाम्प पेपर पर दिया बांड पत्र मान्य नहीं होगा ।

5 साक्ष्यांकन फार्म की तीन फोटो के अतिरिक्त आप अपने साथ सात पासपोर्ट साइज की फोटो और बैंक खाता नंबर, पेन कार्ड व आधार कार्ड की तीन फोटो प्रति अवश्य लावें एवं एक कैंसिल किया हुआ चैक अवश्य लेकर आए बिना इसके नियुक्ति आदेश जारी नहीं किए जाएंगे ।

6 शिक्षा/जाति/तकनीकी/व्यावसायिक योग्यता संबंधी सभी मूल प्रमाण पत्र उनकी किसी भी राजपत्रित अधिकारी से सत्यापित दो प्रतिलिपि, जन्मतिथि प्रमाण पत्र एवं अंतिम शिक्षा संस्थान का शाला छोड़ने का प्रमाण पत्र अवश्य ही लावें ।

7 यदि आप अनुसूचित जाति/जनजाति एवं पिछड़ी जाति के सदस्य हैं तो केन्द्र सरकार हेतु जारी जाति प्रमाण पत्र के प्रोफार्मा को संबंधित जारी करने वाले अधिकारी से आवश्यक रूप से पूर्ण कराकर ही लावें । जाति प्रमाण पत्र पर कार्यालय की राजचिह्न वाली गोल मोहर व जारीकर्ता अधिकारी की खुद की मोहर दोनों होना आवश्यक है ।

8 इसके अतिरिक्त और भी फार्म भेजे जा रहे हैं जिनको भी सावधानी पूर्वक पढ़ कर एवं पूर्णकर लाना है । उक्त सभी फार्म पर काट-पीट, ओवरहैंड राइटिंग मान्य नहीं होगी ।

9 रेलवे बोर्ड के पत्र क्र E/(NG) II/2019/RR-1/29 New Delhi Dt. 08.11.2019 के अनुसार उम्मीदवार यदि निर्धारित देय अपेक्षित अवधि में ज्वाइन नहीं करता है तो प्रस्ताव स्वतः समाप्त हो जाएगा ।

10 यदि निर्धारित अवधि के अंदर किसी उम्मीदवार से समय बढ़ाने संबंधी आवेदन प्राप्त होता है तो उसे स्वीकार किया जा सकता है किन्तु उसे तीन माह से अधिक का समय नहीं दिया जाएगा । विशेष परिस्थितियों में जहां तथा एवं परिस्थितियां गंभीर हो वहां मूल नियुक्ति प्रस्ताव जारी होने की तिथि से अधिकतम छः माह का समय ही दिया जाएगा । नियुक्ति प्रस्ताव मूल नियुक्ति प्रस्ताव जारी होने की तिथि से छः माह बाद स्वतः ही समाप्त हो जाएगा ।

11 यदि संक्षम प्राधिकारी द्वारा समय बढ़ाने की कोई अवधि स्वीकृत की जाती है और उम्मीदवार ज्वाइन नहीं करता (छः माह की अवधि से अधिक नहीं) तो नियुक्ति प्रस्ताव समाप्त हो जाएगा ।

12 एक बार नियुक्ति प्रस्ताव सामान्यतः पुनः अस्तित्व में नहीं आएगा केवल कुछ विशेष परिस्थितियों व जनहित को छोड़कर ।

13 अगर आप निर्धारित अवधि में उपस्थित नहीं होते हैं तो आपका नियुक्ति का प्रस्ताव रद्द समझा जाएगा । संतोषजनक प्रशिक्षण पूर्ण करने एवं अपेक्षित परीक्षा उत्तीर्ण करने के उपरान्त ही मंडल पर उपलब्ध रिक्तियों के आधार पर निम्न शर्तों के अनुसार आपकी नियुक्ति आपके चयनित ग्रेड पे में की जाएगी ।

क. प्रशिक्षण अवधि के दौरान आपकी प्रगति संतोषजनक नहीं होने और प्रशिक्षण पूर्ण होने के उपरान्त अपेक्षित परीक्षा उत्तीर्ण नहीं होने की स्थिति में भारतीय रेल स्थापना संहिता भाग-1 में निहित नियमों के अनुसार कार्यवाही करते हुए आपकी सेवा समाप्त की जा सकेगी ।

ख. संतोषजनक प्रशिक्षण पूर्ण करने पर आप अस्थायी पदपर अस्थायी रोजगार/नियुक्ति के पात्र होंगे और अस्थायी कर्मचारी पर लागू नियमों से शासित होंगे ।

ग. स्थाई संवर्ग में आपकी नियुक्ति स्थाई कर्मचारी के रूप में तभी की जावेगी जब उस संवर्ग में स्थान रिक्त होगा ।

साक्षात्करण फार्म
ATTESTATION FORM

चेतावनी : साक्षात्करण फार्म में गलत जानकारी देना या वास्तविक जानकारी छिपाना अयोग्यता समझी जायेगी और इससे उम्मीदवार सरकारी सेवा के अयोग्य भी ठहराया जा सकता है।

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 Government.

2. यह फार्म भरने और भेजने के बाद यदि उम्मीदवार पकड़ा गया हो, उसे सजा हुई हो, बंचित किया गया हो आदि, तो उसे इसके बारे में लोक सेवा आयोग या रेल सेवा आयोग या उस अधिकारी को, जिसको पहले साक्षात्करण पत्र भेजा गया हो, जैसी स्थिति हो, शीघ्र लिख देना चाहिये अन्यथा यह समझा जायेगा कि वास्तविक जानकारी छिपायी गयी है।

If detained, convicted,debarred etc. subsequent to the completion and submission of this form, the details should be communicated immediately to the Union Public Commission or the Railway Service Commission or the Authority to whom the attestation form has been sent earlier, as the case may be, failing which will be deemed to be a suppression of factual information.

3. यदि नौकरी के दौरान किसी भी समय साक्षात्करण पत्र में यह पाया गया कि गलत जानकारी दी गयी है या वास्तविक जानकारी छिपायी गयी है तो उसकी सेवा समाप्त कर दी जायेगी।

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 person, his/her service would be liable to be terminated.

1. पूरा नाम (स्पष्ट अक्षरों में) उर्फ नाम सहित, यदि हो. Name in full (In Block Capitals) with aliases, if any (कृपया लिखें, यदि किसी समय अपने नाम या कुल नाम में कभी कुछ जोड़ा या घटाया हो) (Please indicate if you have added or dropped at any stage any part of your name or surname)	कुल नाम Surname	नाम Name
2. वर्तमान पूरा पता (अर्थात् ग्राम, थाना और जिला या मकान नम्बर, गल्ली सड़क/ मार्ग और कस्बा) Present address in full (i.e. Village, Thana and District or House Number, Lane/Street/Road and Town.)		
3. (क) घर का पूरा पता (अर्थात् ग्राम, थाना और जिला या मकान नम्बर, गल्ली सड़क/मार्ग और कस्बा और जिला मुख्यालय का नाम) (a) Home address in full (i.e. Village, Thana and District or House Number, Lane/Street/Road and Town and name of District Head Quarters.)		
(ख) यदि पाकिस्तान का मूल निवासी हो तो वहां का पता और भारतीय संघ में आने की तारीख (b) If originally resident of Pakistan, the address in the Country and the date of migration to Indian Union.		

4 स्थानों का विवरण निम्न की अवधि सहित जहाँ अपने पिछले पाँच वर्षों में एक स्थान पर एक वर्ष से अधिक समय तक निवास किया है। यदि विदेश (पाकिस्तान सहित) में रहे हों, तो उन सभी स्थानों का विवरण दिया जाना चाहिए जहाँ 21 वर्ष की अवस्था प्राप्त करने के बाद एक वर्ष से अधिक रहा हो।

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 attaining the age of 21 years should be given.

से From	तक To	निवास का पूरा पता (अर्थात् ग्राम, थाना और जिला या मकान नम्बर गली/सड़क/मार्ग और कस्बा) Residential address in full (i.e., Village, Thana and Distt. or House No. Lane/Street/Road and Town)	पिछले कालम में दिये गये स्थान के जिला मुख्यालय का नाम Name of the District Headquarters of the place mentioned in the preceding Column.

5. पिता का/Father's :-

- (क) पूरा नाम, उर्फ नामों सहित, यदि हो,
(a) Name in full with aliases, if any
- (ख) वर्तमान डाक का पता (यदि मृत हो तो अंतिम पता लिखें)
(b) Present postal address (If dead, last address)
- (ग) घर का स्थायी पता
(c) Permanent Home Address
- (घ) व्यवसाय
(d) Profession
- (ड) यदि सेवा में हो तो पदनाम और कार्यालय का पता लिखें।
(e) If in service, give designation and official address.

(क)

(a)

(ख)

(b)

(ग)

(c)

(घ)

(d)

(ड)

(e)

6. राष्ट्रियता/Nationality of :-

- (i)
(क) पिता
(a) Father
(ख) माता
(b) Mother
(ग) पति पत्नी
(c) Husband/Wife
(घ) उम्मीदवार
(d) Candidate
(ii) पति/पत्नी का जन्मस्थान
(ii) Place of birth of Husband/Wife

(क)

(a)

(ख)

(b)

(ग)

(c)

(घ)

(d)

(ii)

(क) जन्मतिथि (a) Date of Birth	(क) (a) _____
(ख) वर्तमान आयु (b) Present age	(ख) (b) _____
(ग) मैट्रिक उत्तीर्ण करने की आयु (c) Age of Matriculation	(ग) (c) _____
8. (क) जन्म स्थान, जिला और राज्य जिसमें स्थित हो (a) Place of birth, District and State in which situated.	(क) (a) _____
(ख) जिला और राज्य जिस के निवासी हैं (b) District and State to which you belong	(ख) (b) _____
9. (क) आपका धर्म (a) Your Religion	(क) (a) _____
(ख) क्या आप अनुसूचित जाति/अनुसूचित जन जाति के 'हैं' हां या नहीं उत्तर दें और यदि उत्तर हां हो, तो उस जाति का नाम लिखें । (b) Are you a member of a Scheduled Caste/ Scheduled Tribe ? Answer 'Yes or No' and if the answer is 'Yes' state the name thereof.	(ख) (b) _____

7. शैक्षणिक योग्यता :-

15 वर्ष की आयु से स्कूलों और कालेजों में शिक्षा प्राप्त करने की अवधि और स्थान के साथ :-

Educational Qualifications showing places of education with years is Schools and Colleges since 15th year of age :-

स्कूल/कालेज के नाम सहित पूरा पता Name of School/College with full address	प्रवेश-तिथि Date of entering	छोड़ने की तिथि Date of leaving	उत्तीर्ण परीक्षा Examination Passed

11. यदि आपकी कभी नियुक्ति हुई हो, तो उसका विवरण दें :-

If you have at any time been employed, give details :-

पदनाम या कार्य का विवरण Designation of post held or description of work	अवधि Period		कार्यालय, फर्म या संस्था का पूरा पता Full address of the office, firm or institution	पिछली नौकरी छोड़ने के पूरे कारण Full reasons for leaving the previous service
	से From	तक To		

- (13) यदि किसी नौकरी भारत सरकार/राज्य सरकार/भारत सरकार द्वारा नियंत्रित योजना या राज्य सरकार/राज्य शासन/विश्व विद्यालय/स्थायित्व निकाय के अन्तर्गत की गयी हो :

(13) If the previous employment was under the Government of India/a State Government/an undertaking owned or controlled by the Government of India or a State Government/an Autonomous Body/a University/a Local Body -

जदि आपने भारतीय रेल स्थापना संहिता के नियम 149 के अधीन या केन्द्रीय सिविल सेवा (अस्थायी सेवा) नियम 1965 के नियम 5 या इसी प्रकार के अन्य नियमों के अधीन आवश्यक अवधि का नोटिस देकर नौकरी छोड़ी हो तो क्या उस समय या बाद में अथवा आपकी नौकरी खत्म होने से पहले आपके विरुद्ध कोई अनुशासनात्मक कार्रवाई की गयी या किसी मामले में आपके आचरण का स्पष्टीकरण मांगा गया ?

If you had left service on giving the requisite period of notice under Rule 149 of the Indian Railway Establishment Code or Rule 5 of the Central Civil Services (Temporary Service) Rules "1965" or any similar corresponding Rules, were 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 of termination of service, or at a subsequent date, before your services actually terminated.

12. (क) क्या आपको कभी पकड़ा गया/गिरफ्तार किया गया नजर-बंद किया गया/मुचलका लिखाया गया/जुर्माना या किसी अपराध के लिये न्यायालय द्वारा दोषी ठहराया गया या किसी रेल या लोक सेवा आयोग द्वारा उसकी परीक्षाओं/चुनाओं में भाग लेने से वंचित किया गया या अयोग्य ठहराया गया या किसी विश्व विद्यालय या किसी शैक्षणिक प्राधिकारी/संस्था द्वारा निकाला गया/किसी परीक्षा में बैठने से वंचित किया गया ?

(2) Have you ever been arrested, prosecuted, kept under detention, or bound down/fined, convicted by a Court of Law of any offence or debarred/disqualified by any Railway or Public Service Commission from appearing at its examinations/selections or debarred from taking any examinations/rusticated by any University or any other Educational Authority/Institution ?

- (ख) क्या यह साक्ष्यांकन फार्म भरते समय किसी न्यायालय में/या विश्व विद्यालय या किसी अन्य शैक्षणिक प्राधिकारी संस्था में आपके विरुद्ध कोई मुकदमा चल रहा है ?

(b) Is any case pending against you in any Court of Law, University or any other Educational Authority/Institution at the time of filling this attestation form ?

- (ग) यदि (क) और (ख) का उत्तर 'हाँ' हो, तो न्यायालय/विश्व विद्यालय/शैक्षणिक प्राधिकारी आदि के पास चल रहे मुकदमों का पूरा विवरण गिरफ्तार, नजरबन्दी जुर्माना, दोष सिद्धि सजा आदि लिखनी चाहिए।

(c) If the answer to (a) or (b) is 'Yes' full particulars of the case, arrest, detention, fine, conviction, sentence etc. and the nature of the case pending in the Court/ University Educational Authority etc. at the time of filling up this form, should be given.

टिप्पणी - इस साक्ष्यांकन फार्म के ऊपर लिखी गयी 'चेतावनी' भी पढ़िये।

Note - Please also see the 'Warning' at the top of this attestation form.

13. अपने इलाके के दो जिम्मेदार व्यक्तियों के नाम या आपसे परिचित दो व्यक्तियों के नाम	(1) _____ _____
Name and addresses of two responsible persons of your locality or two references to whom you are known.	(2) _____ _____

मैं प्रमाणित करता हूँ कि पूर्ववर्ती सूचना मेरी जानकारी और विश्वास के अनुसार सत्य और पूर्ण है। मैं ऐसी किसी भी परिस्थिति से अचाल नहीं हूँ जो मुझे सरकारी नौकरी से अयोग्य ठहरा सके।

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.

दिनांक / Date _____

स्थान / Place _____

उम्मीदवार का हस्ताक्षर
Signature of Candidate

पहचान प्रमाण-पत्र IDENTITY CERTIFICATE

निम्नलिखित में से कोई भी पहचान प्रमाण-पत्र पर हस्ताक्षर कर सकते हैं :-
Certificate to be signed by any one of the following :-

- केन्द्रीय या राज्य सरकार के कोई भी राजपत्रित अधिकारी
Gazetted Officers of Central or State Government.
- संसद या राज्य विधान सभा के सदस्य
Members of Parliament or State Legislature.
- उप मंडल मैजिस्ट्रेट/अधिकारी
Sub-Divisional Magistrates/Officers.
- तहसिलदार या नायब/उप तहसिलदार जिन्हें मैजिस्ट्रेट के अधिकारी का प्रयोग करने का प्राधिकार प्राप्त हो।
Tehsildars or Naib/Deputy Tehsildars Authorised to exercise magistral powers
- सभी मान्य शैक्षणिक संस्थाओं जिनमें प्राथमरी स्कूल भी शामिल हैं, के प्राचार्य और मुख्य अध्यापक।
Principals and Head Masters of all recognised institution including Primary School.
- खण्ड विकास अधिकारी / Block Development Officer.
- डाकपाल / Post-Masters.
- पंचायत निरीक्षक / Panchayat Inspectors.

प्रमाणित करता हूँ कि मैं श्री _____ के पुत्र/
पुत्री श्री/श्रीमती/कुमारी _____ को गत _____ वर्ष
_____ महीने से अच्छी तरह जानता हूँ तथा मेरी जानकारी तथा विश्वास के अनुसार उसके द्वारा दिये गये विवरण सही हैं।

Certified that I have known Shri/Shrimati/Kumari _____
son/daughter of Shri _____ for the last _____ years
furnished by him/her are correct.

स्थान / Place _____

हस्ताक्षर / Signature

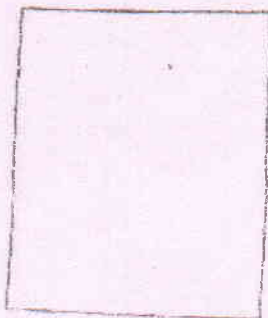
दिनांक / Date _____

(कार्यालय द्वारा भरा जाय)
(To be filled by the office)

पदनाम या ओहदा और पता
Designation or Status and Address

- नाम, पदनाम और पूरा पता
Name, designation and full address of
- प्राधिकारी, जो सत्यापन करता हो, और
The Authority which conducts the verification, and
- प्राधिकारी, जिसको जिला प्राधिकारियों द्वारा रिपोर्ट भेजी जाये।
The Authority to whom the reports have to be sent by the District Authorities.
- पद, जिस या जिनके लिये उम्मीदवार ने आवेदन किया है और जिसके लिये रेल सेवा आयोग या अन्य चयन प्राप्तिद्वारा द्वारा उस पर विचार किया जा रहा है।
Post or Posts for which the candidates applied and for which he is being considered by the Railway Service Commission or other Selecting Authority.

घोषणा पत्र



मैं _____ पुत्र _____
निवासी _____ यह घोषणा करता हूँ कि:-

1. मेरा उपरोक्त नाम, पिता का नाम, पता सही एवं सच है।
2. यह कि मेरे द्वारा प्रस्तुत किए गये शैक्षणिक प्रमाण पत्र, आयु प्रमाण पत्र एवं जाति प्रमाण पत्र सही एवं सच है।
3. यह कि मेरे विरुद्ध कोई आपराधिक/दीवानी मामला न्यायालय या कोई विधिक प्रक्रिया लंबित नहीं है।

मैं _____ पुत्र _____
निवासी _____ यह अग्रेतर घोषणा करता हूँ, कि यदि मेरे द्वारा प्रस्तुत किये गये प्रमाण पत्र/पत्रों को गलत पाया जाता है या प्रस्तर 3 में की गयी घोषणा गलत पाई जाती है, तो नियुक्ति प्राधिकारी को यह अधिकार होगा कि मेरी सेवाएं तत्काल प्रभाव से समाप्त करते हुए मुझे बर्खास्त कर दे। इसके अतिरिक्त इसका प्रभाव यह होगा कि मैं किसी भी राजकीय सेवा के लिए अयोग्य हो जाऊंगा और सक्षम प्राधिकारी को यह अधिकार होगा कि मेरे विरुद्ध भारतीय दण्ड संहिता के समुचित प्रावधानों के अन्तर्गत वांछित कार्यवाही करे।

()

दिनांक:-
स्थान:-

घोषणाकर्ता

नियुक्ति में भेजे जाने विषयक

राजपत्रित अधिकारी से सत्यापित फोटो
अंगूठे का निशान
(सील एवं हस्ताक्षर आधा फोटो एवं आधा पेपर होने चाहिये)

मैं, प्रमाणित करता हूँ कि यह फोटो एवं अंगूठे का
निशान श्री/कुमारी/श्रीमती.....
.....आत्मज श्री की है।

मैं इनसे व्यक्तिगतरूप से पिछले.....वर्ष
माह से जानता हूँ।

हस्ताक्षर
नाम
पदनाम.....
सील.....

सम्मीदवार नियुक्ति के समय यह प्रमाण पत्र किसी राजपत्रित अधिकारी से सत्यापित
करवाकर प्रस्तुत करें अन्यथा नियुक्ति की कार्यवाही नहीं की जायेगी।

FORMET "A"

CHARACTER CERTIFICATE
HEAD OF EDUCATION INSTITUTION LAST ATTENDED
(For Group C Non-sensitive Service)

Certified that I have know Shri/Smt/Ku S/o, D/o,
H/o Shri.....for the last.....years
and.....months and that to the best of my knowledge and belief
he has no antecedents which will render him unsuitable for Government
employment.
Shri/Smt/Ku..... is not related to me

Place:-

Date:-

Signature.
Designation
Seal

(To be attested by stipendiary 1st class Executive Magistrare/district
Magistrate or sub Divisional Megistrate)

Signature.
Designation
Seal

CHARACTER CERTIFICATE

FORMAT - "B"

Certified that I have know Shri/Smt/Ku S/o,
D/o, H/o Shri..... for the last..... years
and..... months and that to the best of my knowledge and belief
he has no antecedents which will render him unsuitable for Government
employment.

2. Shri/Smt/Ku..... is not related to me.

Date:

Signature of the Headmaster/
Principal of the School/College/Emp.
Last attended, with Official Seal.

(This certificate to be attested by Two Gazetted Officers)

1. Signature

2. Signature

Designation

Designation

Date

Date

Office Seal

Office Seal

Note:- This certificate should be issued by the Head of last educational institution attended by the candidate. If you are employed, you should submit a certificate in the same proforma from your employer. This certificate should also be attested by Two Gazetted Officers.

इस घोषणा पत्र को सौ/(100) रुपए के स्टाम्प पेपर पर बनवाकर नोटरी से सत्यापित कराके प्रस्तुत करें।

CR

:: शपथ-पत्र/घोषणा-पत्र/सहमति-पत्र ::

1. मैं नाम पिता का नाम ग्राम
..... तहसील जिला राज्य पिन कोड नं.

शपथपूर्वक सत्यनिष्ठा से घोषणा करता हूँ कि :-

2. यह कि मेरे विरुद्ध किसी भी प्रकार का पुलिस/न्यायाधिक/अन्य प्रकार का सिविल वाद किसी भी न्यायालय/पुलिस थाने में लंबित नहीं है। यदि पुलिस सत्यापन के दौरान यह घोषणा गलत पाई जाती है तो रेल प्रशासन को इस बात का पूरा अधिकार होगा कि कभी भी बिना किसी कारण बताए मेरी सेवाएँ समाप्त कर सकता है।

3. यह कि मेरी शैक्षणिक योग्यता की अंकसूची व जाति प्रमाण पत्र का सत्यापन गलत/त्रुटिपूर्ण पाया जाता है तो रेल प्रशासन को यह अधिकार होगा कि मुझे तत्काल प्रशिक्षण/सेवा से हटा दें, इस बाबत मेरा कोई दावा मान्य नहीं होगा।

4. यह कि यह शपथ पत्र मैं मंडल रेल प्रबंधक (कार्मिक), भोपाल के पत्रांक : प.म.रे./का-भो/भर्ती/110/..... दिनांक के अनुपालन में प्रस्तुत कर रहा हूँ।

स्थान :-

दिनांक :-

शपथकर्ता (उम्मीदवार) के हस्ताक्षर

घोषणा-पत्र

यह कि मैं पुत्र श्री निवासी - ग्राम
..... तहसील जिला
राज्य पिन कोड नं. घोषित करता हूँ कि मेरे द्वारा कंडिका 01 से 04 तक दी गई जानकारी सत्य है। किसी भी असत्य जानकारी हेतु मैं स्वयं जवाबदेह हूँ।

स्थान :-

दिनांक :-

शपथकर्ता (उम्मीदवार) के हस्ताक्षर
नाम

साक्षी :-

1 हस्ताक्षर
नाम
पता

2 हस्ताक्षर
नाम
पता

FORM OF AGREEMENT

WEST CENTRAL RAILWAY

ARTICLE OF AGREEMENT This-----day of-----between-----
s/o Shri-----residing at-----
----- (hereinafter referred as Trainee) of the first part and -----
S/o Shri-----residing at (Father of the Second Part)
and the President of India acting by and through the West Central Railway Administration of the third part.

Whereas the President of India (hereinafter referred to as the Govt.) has it the request of the parties of the first part and second part engaged the Trainee and the Trainee has with the consent of the part of the second part agreed to serve the Govt. as a trainee with a view to his subsequent appointment to the ----- Deptt. of Indian Railway on the terms and conditions hereinafter appearing.

NOW THESE PRESENTS WITNESS AND THE PARTIES HERE TO RESPECTIVELY agree as follows:-

1. The trainee and his own father will and with the consent of the part of the second part hereby binds himself to serve the Govt. as-----in any place situated on the W.C.Rly system for a period of the year commencing from the-----of-----and the Govt. engage to give Training in India as -----mentioned provided always as the Govt. may at their discretion alter or modify that periods and courses of place of training before the expiry of the said period of one year as hereinafter provided.
2. The period of training shall be to one year as aforesaid and that the trainee shall receive monthly stipend of Rs.----- per month along with dearness and other allowance as they be admissible under the rules of extent orders from time to time.
3. The continuance of the training shall depend on the satisfactory conduct & progress of the trainee as certified to the Govt. the Authority under whom he may be serving should be at any time during the training not satisfy the authority under whom he working, he is making good progress or that his conduct is otherwise satisfactory, he shall be liable to be discharged from his training herein provided. The Govt. of the Officer appointed by whom in that behalf shall be the sole and absolute judge (whose decision shall be final) for the purpose of determining whether the progress of the trainee in training is or is not satisfactory.
4. The trainee shall employ himself honestly, efficiently and diligently under the orders, instructions required of under whom he shall do all things which his capacity as trainee him or which are necessary to be
5. The trainee having first obtained the permission of the ----- authorized in that behalf of the Govt. or in case of ----- or accident without forwarding medical certificate satisfactory to such officer.
6. The trainee shall devote his whole time to the training and shall not carry on or be concerned in any other trade of business or occupation whatever.
7. The trainee shall be responsible for the charge and the care of Govt. money, goods and stores and other property entrusted to him or in his hands and shall truly and faithfully account for or pay over or deliver to the proper officers all money, goods, and stores and property which shall at any time come to his hands or be under his charge on account of the Government.

8. The trainee shall confirm to all the rules and regulations of Deptt. to which he may be attached for training time and shall obey all such orders and directions as he shall get from time to time received the officer and or officers placed in authority above him.

9. The trainee will if required, pass an examination in any Indian languages.

10. The Govt. shall be at liberty to deduct from time to time of the money is due to be paid to the Trainee as aforesaid any sum or sums of money which may be reasonable for any loss of the occasioned by the absence, sickness without any approved medical certificate or their in capacity to work and also for any loss which the Govt. may sustain by reason of the negligence misconduct of the Trainee.

11. Should the trainee be guilty of any in-subordination, interference or other misconduct of any breach of non-performance or provision of those presented if any time during the continuance of the training it shall be lawful for the Govt. of the officer having authority in that behalf immediately and without previous notice be dismiss or discharge him from the training and the Govt. or such officer shall be the sole and absolute judge whose decision shall be final for the purpose of determining whether the trainee has been guilty of any during training period.

12. The trainee should be lawful for the Govt. with satisfication on the medical evidence that the trainee is unfit and if likely for a considerable period to 'continue unfit by reason of illness, ill health to obtain or to complete their training to determination the training without previous notice (the decision of the Govt. being otherwise) and thereupon his training shall be terminated.

I. Signature of the Trainee-----

Witness (2) to the Trainee's signature, sign, name & Address.

1.-----

2.-----

II. Signature of Surety-----

(a) His name-----

(b) His occupation & his address

(c) His home address-----

Witness to the Surety.

1. His signature, name & address:-

2. His sign, name & address:-

Signed by

On behalf of the President of India (Name & Design.)

DEED OF INDEMNITY

This deed of indemnity made at this----- day of 201----- by Shri/Smt/ Ku.-----
-----S/o, D/o, f/o Shri----- residing at-----
hereinafter referred to as trainee which expression shall include his/her heirs executors administrators and
representatives where the context so admits and Shri----- S/o, D/o, f/o
Shri----- residing at----- hereinafter
referred to as which expression shall include his heirs, executors administrators and representatives where
the context as admits of the one part and the President of India, owner and administrator of the West
Central Railway (hereinafter referred to as the Government of the other part).

Where the Govt. has engaged the trainee on the terms and conditions contained in the joining
report dated ----- executed by the trainee and between the trainees and the Govt. and
whereas the surety is interested in the Welfare of the said trainee and therefore was agreed by those
presents as surety.

AND WHEREAS one of the term and condition to the said engagement of the trainees in that the
trainee shall complete the prescribed training and after such completion shall accept service under the
Govt. and serve the Govt. for a minimum period of five years and if the trainee deserves the service or
resigns from the service during the term and training or thereafter without the written consent of the Govt.
of is discharged there from for misconduct or any other offence as enumerated in the deed the trainee
shall repay on demand by the Govt. the whole amount of training or any other amounts excluding traveling
and running allowances drawn by the trainee from the Govt. under these terms and conditions.

And where as the surety has agreed to indemnity and or throu basis the Govt. to the extent.

Now those present witnesses ibid is hereby agreed by and between the parties as follows:-

- (1) That in consideration of the premises and in consideration the government agreeing to engage the trainee for the course mentioned in the joining report referred to above the trainee after completion period of 05 years thereafter in accordance with the said joining report executed between the trainee and the Govt. to the complete satisfaction of the Govt. decision of the Govt. about which shall be final and conclusively.
- (2) That the training the surety hereby undertake jointly and severally to indemnify the reimburse the Govt. to that extent as aforesaid.
- (3) That in the event of trainee setting an advance report regarding the progress of his/her training or studies of conduct or in continuation of his stands or being from the course or refusal to continuous for any reasons as aforesaid trainee and shall jointly and severally be liable to pay refund forthwith the Government.
- (4) That the liability of the surety here under shall not be impaired or discharged Govt. or any present authorised by the Govt. whether with or without the by reason of time being granted or any forbearance, act or omission of the knowledge or consent of the surety nor shall it be necessary for the Govt. to use the trainee before using the surety for the amount due here and under.
- (5) That if there is any dispute as the affect measuring to these presents or otherwise, how so ever, except as to a matter of which specific provision presents, the same shall be referred to the sole arbitration of the Secretary to the Govt. of India in the Ministry of Railways or any person appointed by him whose decision shall be final and binding on the party. The provisions of the Arbitration and Conciliation Act 1996 as amended from time to time shall apply.

In witness thereof the parties have set their hands on the day and year first above written.

Name of applicant _____

Signature_____

Signed by the trainee above named in the presence of following² witness:-

1. Name_____ Signature_____

2. Name_____ Signature_____

Signed by the surety as under.

Signature_____

Name_____

Date of birth_____

Office_____

Pay & Grade_____verification by Officer/Deptt.

Signed by the surety in presence of following witness:-

1. Name_____ Designation_____

2. Name_____ Designation_____

For and on behalf of the President of India in the presence of :-

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO THE POST UNDER
THE GOVERNMENT OF INDIA**

This is to certify that Shri/Smt./Ku.....son/daughter of
Shri/Smt.....of
Village/Town.....
District/Division..... in the
community which is recognized as a backward class under:-

- i) Resolution No.12011/68/93-BCC dated the 10th September, 1993 published in the Gazette of India Extraordinary - Part I, Section I, No.186 dated 13th September, 1993.
- ii) Resolution No.12011/9/94-BCC dated 19.10.1994 published in the Gazette of India Extraordinary - Part I, Section I, No.163 dated 20th October, 1994.
- iii) Resolution No.12011/7/95-DCC dated the 24th May 1995, published in the Gazette of India Extraordinary - Part I, Section I, No.88 dated 25th May, 1995.
- iv) Resolution No.12011/96/94-BCC dated the 9th March, 1996.
- v) Resolution No.12011/44/96-BCC dated the 6th December 1996, published in the Gazette of India Extraordinary - Part I, Section I, No.210 dated 11th December, 1993.
- vi) Resolution No.12011/13/97-BCC dated the 3rd December 1997.
- vii) Resolution No.12011/99/94-BCC dated the 11th December 1997.
- viii) Resolution No.12011/68/98-BCC dated the 27th October, 1999.
- ix) Resolution No.12011/88/98-BCC dated the 6th December 1999, published in the Gazette of India Extraordinary - Part I, Section I, No.270 dated 6th December 1999.
- x) Resolution No.12011/36/99-BCC dated the 4th April, 2000, published in the Gazette of India Extraordinary - Part I, Section I, No.71 dated 4th April, 2000.
- xi) Resolution No.12011/44/99-BCC dated the 21st September 2000, published in the Gazette of India Extraordinary - Part I, Section I, No.210 dated 21st September 2000.

Shri/Smt./Ku.....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 B of the Scheduled to the Government of India, Department of Personnel & Training OM No.36033/3/2004-Estt.(Res.) dated 09.03.2004.(JTM).

District Magistrate or
Deputy Commissioner etc.

Dated:

Seal :

Note: (a) The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the people Act, 1950.

(b) The authorities competent to issue Caster Certificate are indicated below:

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/Sub Division Magistrate/Taluka Magistrate/Executive Magistrate/Extra-Assistant Commissioner (not below the rank of 1st class stipendiary Magistrate)
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar
- (iv) Sub-Divisional Officers of the area where the candidate and/or his family resides.

FORM OF CERTIFICATE TO BE PRODUCED BY A CANDIDATE BELONGING TO A SCHEDULED CASTE OR SCHEDULE TRIBES IN SUPPORT OF HIS CLAIM.

FORM OF CASTE CERTIFICATE

This is to certify that Shri / Shrimati/Kumari _____
Son/Daughter of Shri _____
Of village/Town _____ in District/Division _____
Of the State/ Union Territory _____ belongs to the
_____ Caste / Tribe which is recognized as
Scheduled Caste/ Scheduled Tribe as under:-

The Constitution (Scheduled Castes) order 1950

The Constitution (Scheduled Tribes) order 1950

The Constitution (Scheduled Caste) (Union Territories) order 1950

The Constitution (Scheduled Tribes) (Union Territories) order 1950

NB: As amended by the scheduled castes and scheduled tribes list (Modification) order, 1956, the Bombay reorganization Act, 1960, the Punjab reorganisation act, 1956, the state of Himachal Pradesh Act, 1970 and the North Eastern Area (Reorganisation Act, 1971 and the Scheduled castes and scheduled tribes order (Amendment) Act, 1975.

The Constitution (Jammu & Kashmir) Scheduled Caste order ,1956

The Constitution (Andaman & Nicobar Islands) Scheduled Tribes order, 1950

The Constitution (Dadra & Nagar Haveli) Scheduled Caste, order, 1962

The Constitution (Pondichery) Scheduled Castes order, 1964

The Constitution (Scheduled Tribes) (Uttar Pradesh) order 1967

The Constitution (Goa, Daman, Diu) Scheduled Castes order, 1968

The Constitution (Goa, Daman, Diu) Scheduled Tribes order, 1968

The Constitution (Nagaland) Scheduled Tribes order, 1970

2. This Certificate is issued on the basis of the Scheduled Caste / Scheduled Tribe Certificate issued to —

Shri/Shrimati/Kumari _____ Father/Mother of
Shri/Shrimati/Kumari _____
Of Village/Town _____ to District/Division _____
Of the State/Union Territory _____ who belongs to the _____
Caste Tribe which is recognized as a Scheduled Caste/Scheduled Tribe.

In the State/Union Territory _____
issued by the _____ vide their letter No. _____
(Name of prescribed Authority)

Dated _____

Seal

Signature :
Designation :

(With seal of Office.)
State/Union Territory.

Place :

Date :

* Please quote Specific presidential order.

NATIONAL PENSION SYSTEM (NPS) - SUBSCRIBER REGISTRATION FORM

Central Recordkeeping Agency (CRA) - NSDL e-Governance Infrastructure Limited

Please select your category
Please tick(✓)]

Central Govt.
Central Autonomous Body
All Citizen Model
NPS Lite (GDS)

State Govt.
State Autonomous Body
Corporate Sector

Affix
recent photograph of
3.5 cm x 2.5 cm size /
Passport size

To,
National Pension System Trust.
Dear Sir/Madam,

I hereby request that an NPS account be opened in my name as per the particulars given below:

* Indicates mandatory fields. Please fill the form in English and BLOCK letters with black ink pen. (Refer general guidelines at instructions page)
KYC Number, Retirement Adviser Code and Spouse Name fields are not applicable for Government & NPS Lite Subscribers

KYC Number (if applicable)

Retirement Adviser Code (If applicable)

Generated from Central KYC Registry

1. PERSONAL DETAILS: (Please refer to Sr. No.1 of the instructions)

Name of Applicant in full

Shri ☐ Smt. ☐ Kumari ☐

First Name*

Middle Name

Last Name

Subscriber's Maiden Name (if any)

Father's Name*

(Refer Sr. No. 1 of instructions)

Mother's Name*

(Refer Sr. No. 1 of instructions)

Father's name will be printed on PRAN card. In case, mother's name to be printed instead of father's name [Please tick (✓)] ☐

Date of Birth*

City of Birth*

Country of Birth*

Gender* [Please tick (✓)]

Marital Status*

Spouse Name*

(Refer Sr. No. 1 of instructions)

Residential Status*

Indian

(Date of Birth should be supported by relevant documentary proof)

2. PROOF OF IDENTITY (PoI)* (Any one of the documents need to be provided along with the identification number)

Passport

Voter ID Card

Driving License

NREGA JOB Card

Others

Passport Expiry Date

PAN Card

Driving License Expiry Date

Name of the ID

Please refer Sr. No. 2 of the instructions.

UID (Aadhaar)

☐

(UIDI [Aadhaar] number not required.)

As per the amendments made under Prevention of Money-Laundering (Maintenance of Records) Second Amendment Rules, 2019, PAN or Form 60 is mandatory under NPS. If you do not have PAN at present, please ensure that these details are provided within six months of submission of this Subscriber Registration Form.

PROOF OF ADDRESS (PoA)*

[Please tick (✓), as applicable]

#Not more than 2 months old

Please refer Sr. No. 2 of the instructions

Correspondence Address

Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others

Registered Lease/Sale agreement of residence/Municipal Tax Receipt

#Latest Piped Gas/Water/Electricity/Telephone(Landline or postpaid mobile) Bill

Permanent Address

Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others

Registered Lease/Sale agreement of residence/Municipal Tax Receipt

#Latest Piped Gas/Water/Electricity/Telephone(Landline or postpaid mobile) Bill

4.1 CORRESPONDENCE ADDRESS DETAILS*

Address Type*

Flat/Room/Door/Block no.

Premises/Building/Village

Road/Street/Lane

Area/Locality/Taluk

City/Town/District

State/U.T.

Residential/Business

Residential

Business

Registered Office

Unspecified

Landmark

PIN Code

4.2 PERMANENT ADDRESS DETAILS*

☐ Tick (✓) in the box in case the address is same as above.

Address Type*

Flat/Room/Door/Block no.

Premises/Building/Village

Road/Street/Lane

Area/Locality/Taluk

City/Town/District

State/U.T.

Residential/Business

Residential

Business

Registered Office

Unspecified

Landmark

PIN Code

[illegible]

Occupation Details* [please tick(✓)]

Private Sector ☐ Public Sector ☐ Government Sector ☐ Professional ☐

Self Employed ☐ Homemaker ☐ Student ☐ Others (Please Specify)

Income Range (per annum) Upto 1 lac ☐ 1 lac to 5 lac ☐ 5 lac to 10 lac ☐ 10 lac to 25 lac ☐ 25 lac and above ☐

Educational Qualifications Below SSC ☐ SSC ☐ HSC ☐ Graduate ☐ Masters ☐ Professionals (CA, CS, CMA, etc) ☐

Please Tick If Applicable Politically exposed person ☐ Related to Politically exposed Person ☐ (Please refer instruction no.3)

Account Type [please tick(✓)]	Savings A/c ☐	Current A/c ☐
Bank A/c Number		
Bank Name		
Branch Name		
Branch Address		
	PIN Code	
Bank MICR Code	IFS Code	

Nominee's Guardian Details (in case of a minor)									
First Name				Middle Name			Last Name		

I would like my PRAN to be printed in Hindi: YES ☐ NO ☐ If Yes, please submit details on Annexure II

1. **Government Sector:** The following Pension Funds (PFs) will act jointly as default PFs, if choice is not exercised by the government employee/subscriber
 (a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd. In case of Central Autonomous Bodies (CAB)/ State Government (SG)/State Autonomous Bodies (SAB) employees, selection made under this section will be ignored, if choice to employees is not notified by the respective State Govt./Ministry.
2. **All Citizen Model:** Subscribers under All Citizen model have the option to choose the available PFs as per their choice in the table below.
3. **Corporate Model:** Subscribers shall have the option to choose the available PFs as per the below table in consultation with their respective Employer.
4. **NPS Lite:** NPS Lite is a group choice model where subscriber has a choice of PF and investment option as available with Aggregator.

Name of the Pension Fund (Please select only one)	Please Tick (✓)	Default Choice of Pension Funds
LIC Pension Fund Limited	☐	Available in Government sector, if employee/subscriber does not exercise choice of PF
SBI Pension Funds Private Limited	☐	
UTI Retirement Solutions Limited	☐	
ICICI Prudential Pension Funds Management Company Limited	☐	
Kotak Mahindra Pension Fund Limited	☐	
HDFC Pension Management Company Limited	☐	
Birla Sunlife Pension Management Limited	☐	

In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

(iii) ACTIVE CHOICE – ASSET ALLOCATION (to be filled up only in case you have selected 'Active Choice' the investment option)

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Government Bonds and related instruments; Asset Class A-Alternative Investment Funds including instruments like CMBS, MBS, REITS, AIFs, Invits etc.
Specify %					100%	
Choices in Govt sector	Not available		Available	Not available	In case of Government employee/subscriber the Active choice of Asset Allocation is restricted to Asset Class 'G' only	

Please note:

- Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- The total allocation across E, C, G and A asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(iv) AUTO CHOICE OPTION (to be filled up only in case you have selected the 'Auto Choice' investment option). In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.

Life Cycle (LC) Funds	Please Tick (✓) Only One	Choices in Govt sector	Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset 2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset 3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset 4. Govt. employee can exercise Auto Choice of Asset Allocation for LC 25 & LC 50 only
LC 75		Not available	
LC 50		Available	
LC 25			

1. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE (Please refer to Sr no. 7 of the instructions):

Section I*

US Person* Yes ☐ No ☐

Section II*

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/functional equivalent in each country is set out below or I have indicated that a TIN/functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one):

Particulars	Country (1)	Country (2)	Country (3)
Country/countries of tax residency			
Address in the jurisdiction for Tax Residence	Address Line 1		
	City/Town/Village		
	State		
	ZIP/Post Code		
Tax Identification Number (TIN)/Functional equivalent Number			
TIN/ Functional equivalent Number Issuing Country			
Validity of documentary evidence provided (Wherever applicable)			

I certify that:

- It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules 114F to 114H of the Income tax Rules, 1962 thereunder and the information provided in the Form is in accordance with the aforesaid rules.
- the information provided by me in the Form, its supporting Annexures as well as in the documentary evidence are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- I permit/authorise the NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by the NPS Trust and any of NPS intermediaries wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence.
- I also agree that in case of my failure to disclose any material fact known to me, now or in future, the NPS Trust may report to any regulator and/or any authority designated by the Government of India (GOI)/RBI/IRDA/PFRDA for the purpose or take any other action as may be deemed appropriate by the NPS Trust if the deficiency is not remedied by me within the stipulated period.
- I hereby accept and acknowledge that the NPS Trust shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the NPS Trust
- I also agree to furnish such information and/or documents as the NPS Trust may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date Place: Name of subscriber Signature/Thumb Impression* of Subscriber in black Ink
(* LTI in case of male and RTI in case of females)

12. DECLARATION BY SUBSCRIBER* (Please refer to Sr no. 8 of the instructions)**Declaration & Authorization by all subscribers**

I have read and understood the terms and conditions of the National Pension System and hereby agree to the same along with the PFRDA Act, regulations framed thereunder and declare that the information and documents furnished by me are true and correct, to the best of my knowledge and belief. I undertake to inform immediately the Central Record Keeping Agency/National Pension System Trust, of any change in the above information furnished by me. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any false or incorrect information or documents.

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-PIN (to access CRA website and view details) & T-PIN.

Declaration under the Prevention of Money Laundering Act, 2002

I hereby declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

Date

Place :

Signature/Thumb Impression* of Subscriber in black Ink
 (* LTI in case of male and RTI in case of females)
13. DECLARATION BY EMPLOYER**Applicable to Government Subscribers only****(Subscribers Employment Details to be filled and attested by the Deptt. (All Details are Mandatory))**

Date of Joining		Date of Retirement	
Employee Code/ID (If applicable)		Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.	
PPAN (If applicable)			
Group of Employee (Tick as applicable)	Group A ☐	Group B ☐	Group C ☐ Group D ☐
Office			
Department			
Ministry			
DDO Registration Number			
DTA/PAO/CDDO/DTA/PrAO Registration Number			
Basic Pay			
Pay Scale			

It is certified that the details provided in this subscriber registration form by _____ employed with us, including the address and employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

Signature of the Authorised person (In the box above)	Rubber Stamp of the DDO (In the box above)	Signature of the Authorised person (In the box above)	Rubber Stamp of the DTA/PAO/CDDO/ DTA/PrAO (In the box above)
Designation of the Authorised Person		Designation of the Authorised Person	
Name of the DDO		Name of DTA/PAO/CDDO/DTA/PrAO	
Deptt/Ministry		Date	

14. DECLARATION BY EMPLOYER/ CORPORATE**Applicable to Corporate Subscribers only****(Subscribers Employment Details to be filled and attested by Corporate (All Details are Mandatory))**

Date of Joining		Date of Retirement	
Employee Code/ID			
Corporate Regd. Number (CHO No.) Allotted by CRA			
CBC No. allotted by CRA			

Certified that the details provided in this subscriber registration form by _____ employed with us, including the employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he / she has read the entries / entries have been read over to him / her by us and got confirmed by him / her.

Date Place

Signature of the Authorised person (In the box above)	
Designation of the Authorised Person	Rubber Stamp of the Corporate (In the box above)

15. DECLARATION BY THE AGGREGATOR

Applicable to NPS Lite Subscribers

Authorisation by Aggregator's office (NL - AO)

Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NPS and the above declaration has been signed /thumb impressed before me by after (s)he has read the entries/ entries have been read over to her/him by me.

Signature of the Authorised person (In the box above)	Rubber Stamp of the Aggregator (In the box above)

Name of the Aggregator

NPS Lite Account Office (NL-AO) Registration Number

NPS Lite - Collection Centre (NL - CC) Registration Number

Membership No. allotted by Aggregator (if any)

Place

Date

16. TO BE FILLED BY POP-SP

Receipt No. (17 digits)

POP-SP Registration Number

Document accepted for date of Birth Proof:

Copy of PAN card submitted

YES ☐ NO ☐

KYC Compliance

YES ☐ NO ☐

Documents Received:

(Originals Verified) Self Certified

(Attested) True Copies

Identity Verification :

Done

Existing Customer:

I/we hereby certify/confirm that Shri/Smt/Kum is an existing KYC verified customer. The above applicant is having an operative Bank/ Demat/Folio/ account (specify nature of the account) having account number/client ID maintained at branch/office. The KYC documents available with us for this customer/client matches the requirement for opening NPS account and are in compliance with PMLA Rules. I/we further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP).

Aadhaar Based KYC Certificate:

I/we hereby certify that Aadhaar Number of Sh/Smt/Kum has been checked and the name and address mentioned on the original Aadhaar card are matching with that mentioned on NPS application form.

To be filled by POP-SP	Name:	
	Designation:	Place:
POP-SP Seal	Signature of Authorized Signatory	Date

[To be filled by CRA - Facilitation Centre (CRA-FC)]

Received by

CRA-FC Registration Number

Received at

Date

Acknowledgement Number (by CRA-FC)

PRAN Alloted

ACKNOWLEDGEMENT

Name of the Subscriber:

Contribution Amount Remitted:

Date of Receipt of Application and Contribution Amount:

Stamp and Signature of the Employer/PoP: