PASSPORT SIZE PHOTOGRAPH DULY ATTESTED BY A GAZETTED OFFICER

### APPENDIX - VI

### ATTESTATIN FORM

	1.	Name in Full ( aliases, if any	IN CAPITALS) with	SURNAME	NAME
		( Please indicate	If you have added or		
		dropped at any s	tate any part of your		승규 방법을 다 없는 것 같아요. 이 것 같아.
	ĺ.	name or sumame			
	2.	Present addr			L
		Village/ Than	a and District or		should be a
		House Numbe	er, Lane/		
		Street/Road ar	nd Town).		
	3	(a) Home add	ress in full i.e.		
	- 1	Village/ Thana	and District or		
		House Numbe	r, Lane/	n an	and the state of the second state of the secon
		Street/Road an	d Town).		Sin to make the species weather the
	1	(b) If originally	y a resident of Pak	istan, the	August and an
		address in that	country and the da	ate of	
	_	migration to In	dian Union		
4	- 1	Particulars of	f places (with p	eriods of residence	e where you have resided for
		more than on	e year at a time	during the prece	ding five wear
		From	To	Residential address in	n full i.e. Village/Thana and District or
	L			House Number Lane	/ Street/Road and Town).
					r Buccivitoad and Town).
	-				
	-		1		and a second
	F			an a ha bahar a a an ar ar ar	<ul> <li>A subscription of the state of</li></ul>
	1				
	-				and the second
5	H	Tather's nam	e in full		
	V	vith aliases, if	any		
		) Present post			
		if dead, give I			
		) Permanent	lome		
1,3		ddress			
•	June	Profession			
	d)	If in service,	give		
	de	esignation and	dofficial		
		ldress			
			i		

Contd.....2/-

6	Nationality		and then the same we are a larger same and the first same to a	n banan kata a an ang sa ang pang a a ang ang ang ang ang ang ang ang	· · · · · · · · · · · · · · · · · · ·
	a) Father				· · · · · · · · · · · · · · · · · · ·
	b) Mother				
a danah	c) Husband/Wife				
	d) Candidate				
3 	e)Place of birth of				
	husbaud/wife	à la chairte			
7	a)Exact date of birth	-			
	b)Present age				
	c)Age at Matriculation	-		,	
8	a)Place of birth, District and	1			
	State in which situated				
	b)District and State to which				
0	you belong				re h l'
9	a)Your religion				
	b) Are you a member of Scheduled Caste/ Scheduled Tribe? 'Yes' or				
	'No' and if the answer is 'Yes', state				
10	the name thereof.		an a sa		
10	Educational qualification show	ing places	of education	with years i	n schools and
	college since 15 <sup>th</sup> year of age. Name of school/ college with fi				
	traine of school college with n	III address		Date of	Examinatio
			entering	leaving	Passed
Sector in the					an an san sa
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			1	· · · · · · · · · · · · · · · · · · ·	
					2
2					
					2
					2
	Lf-you-have at any time been er	nployed,	give details:		2
F	If you have at any time been er Designation Period		Full Address		Full reasor
	Designation Period		give details: Full Address office, firm of		for leaving
	Designation Period of post held and Description of From		Full Address		for leaving the previou
	Designation Period of post held and		Full Address		Full reason for leaving the previou service
	Designation Period of post held and Description of From		Full Address		for leaving the previou
	Designation Period of post held and Description of From		Full Address		for leaving the previou
	Designation Period of post held and Description of From		Full Address		for leaving the previou
	Designation Period of post held and Description of From		Full Address		for leaving the previou
	Designation Period of post held and Description of From		Full Address		for leaving the previou
	Designation Period of post held and Description of From		Full Address		for leaving the previou

Contd....3/-

12	Have you ever been prosecuted, kept under detention, or bound down/ fined, convicted by a court of law for any offence?	
	Is any case pending against you in any court of law at the time of filling up this attestation form?	
	If the answer is 'Yes', full particulars of the case, detention, fine, conviction, sentence etc should be given.	in hand a second for the second of the se Second second of the second
13	Name of two responsible persons of your locality or two references to whom you are known.	1
		2

I certify that 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 candidate.....

Date .....

Contd.....4/-

### IDENTITY CERTIFICATE

### Certificate to be signed by any one of the following:

- i) Gazetted Officers of Central or State Government.
- ii) Members of Parliament or State Legislature.
- iii) Non-gazetted Sub-Divisional Magistrates/ Officers
- iv) Tehsildars or Naib /Dy.Tehsildars authorized to exercise magisterial powers.

Place:	Signature & Seal Designation or Status and address:
Date	ariter and the second sec

### Kendriya Vidyalaya Sangathan

(Dehradun Region)

Salawala, Hathibarkala, Dehradun-248001

### CHARACTER CERTIFICATE

Certified that I have known Shri/Smt /Kumari.....for the last......for the last......years and son/daughter of......for the last......for the last......years and bears good character and has no aniecedents which rander him/her unsuitable for employment in the Kendriya Vidyalaya Sangathan.

Shri/Smt/Kumeri.....is not related to me.

Place .....

Signature.....

Dated.....

Designation....

### ACCEPTANCE OF OFFER OF APPOINTMENT

1				hereby	accept	the offer	of appoin	itment to
the post of	м м		in	Keridriya	Vidyala	ya		
		your letter	No			dated.		
and also the term	ns & conditions	mentioned	therein.	l adiae	to join	duty at t	he place ar	rd on the
date indicated th	ərəin.	1 × 44				21 82	×.	

I will not request for transfer within three years of initial appointment and will serve atleast for 3 years at the place of first posting.

		- Allon (	Signatura
			(Name in block letters)
	а <sup>2</sup> ж Г	e de la companya de l	Address
Dated		 Acett Commiss	sioner, Kendriya Vidyalaya Sangathan,

Copy submitted with compliments to the Assit. Commissioner, Rendrive Vidyalaya Sangathan Dehredur Region, Hathibarkala, Dehradun for Information and becassary solich.

### Kendriya Vidyalaya Sangathan (Dehradun Region)

Salawala, Hathibarkala Dehradun - 248 001

### CANDIDATE'S STATEMENT AND DECLARATION

8.	Board within last 3 years			No. of brothers dead their ages at death and cause of death 4 No. of sisters dead their ages at death and cause of death.
8.	Board within last 3 years Furnish the following parti Father's age, if living and state of health 1	? culars concerning your fam Father's age at death and cause of death 2	ily :- No. of brothers living their ages and state of health	No. of brothers dead their ages at death and cause of death
	Board within last 3 years Furnish the following parti Father's age, if living and state of health	? culars concerning your lam Father's age at death and cause of death	ily :- No. of brothers living their ages and state of health	No. of brothers dead their ages at death and cause of death
	Board within last 3 years Furnish the following parti Father's age, if living and state of health	? culars concerning your lam Father's age at death and cause of death	ily :- No. of brothers living their ages and state of	No. of brothers dead their ages at death and
	Board within last 3 years	?		1edical
	Have you been examined	and declared unfit for Govt	. Service by Medical officer/ N	
6.			e to overwork or any other cau	ise ?
5.	Have you or any of your r fits, epilepsy, or insanity ?		with consumption, scrofula, g	
	When were you last vacc			
1				
	b) Any other disease or a	accident requirng confineme	ent to bed and medical or surg	ical Ireatment ?
			Or	•••••••••••••••••••••••••••••
5 5 5	shirting of blood, asing	ama, near disease, long dis	sease, fainting attacks, rheum	
J.	a) Have you ever had si	mall pox intermittent or any	other lever, enlargement or a	suppuration of gland
с Г	State your age and place	of birth		
				•••••••••••••••••••••••••••••••••••••••
2.	State your name in full (In block letters)			

I declare all the above answer to be, to the best of my belief are true and correct.

I also solemly affirm that I have not received a disability certificate/pension on account of any disease or other condition.

Candidate signature	 	 	 	 
				$\overline{x}$

Signed in my presence.....

Signature of Civil Surgeon or Medical Officer of equal rank

Note :- The candidate will be held responsible for the accuracy of the above statement. By suppressing any infromation, he will incur the risk of lossing the appointment, and if appointed, of forfitting all claims of superannuation on allowance or/and gratuity.

Annexure - 11

### KENDRIYA VIDYALAYA SANGATHAN (DEHRADUN REGION)

Salawala, Hathibarkala Dehradun - 248 001

### MEDICAL CERTIFICATE

<ol> <li>Name of candidate for a (in block letters)</li> </ol>	appointment	
2. Caste or Race		
3. Residence		
4. Father's name and resid	lence	
5. Date of birth by Christ can be ascertained	ian era as nearly	
6. Exact height by measu	irement	
7. Personal marks of ider	ntification	
8. Signature of the candid	date ,	
		Shri/Smt./Kumari
and can not discover the affection or bodily infirm	at he/she has any lity, except disqualification fo to his/her own sta	y disease communicable or otherwise constitutional or employment in the
I also hereby certify t	hat I have examin	ned and do not discover that she is pregnant.
		of the candidate
Left hand thumb and I	inger impression o	Ji ne cundulte minimum
Signature of the candidat taken before.	te	
Name of the Officer	· · · · · · · · · · · · · · · · · · ·	
Signature of the Officer		
Designation of Officer		

### KENDRIYA VIDYALAYA SANGATHAN

( Dehra Dun Region )

Salawala, Hathibarkala Dehradun-248001

### OATH OF ALLEGIANCE

L.....solemnly affirm that I will be faithful and bear true allegiance to India and to the constitution of India as by law established and that I will carry the duties of my office loyally, honestly and with impartiality.

So help me God.

Signature.....

Date....

### Kendriya Vidyalaya Sangathan

(Dehradun Region)

### DECLARATION

1. Shri/Shrimati/Kumari..... declare as under :

\*(a) That I am unmarried/a widower/a widow.

- \*(b) That I am married and have only one wife living.
- \*(c) That I am married and have more than one wife living. Application for grant of exemption is enclosed.
- \*(d) That I am married and that during the life time of my spouse, I have contracted another marriage. Application for grant of exemption is enclosed.

\*(e) That I have contracted a marriage with a person who has already one wile or more living. Application for grant of exemption is enclosed.

 \*\*! solemnly affirm that the above declaration is true and understand that in the event of the declaration being found to be incorrect after my appointment. I shall be liable to be dismissed from service.

Signature.

Dote -

SERVICE AGREEMENT CUM SURETY BOND (To be executed on non-judicial stamp paper worth of Rs. \_\_\_\_\_/- (Rs. \_\_\_\_\_\_ (of the value as per rules of the State) only and Rs 1.00 (Rs. One only) Revenue Stamp to be affixed on top left side of first page.

This contract made on this \_\_\_\_ day of \_\_\_\_\_ Two thousand and Nineteen BETWEEN the KVS through the \_\_\_\_\_\_ (designation of the person in KVS) having its office at \_\_\_\_\_\_ hereafter called the "Employer" (which term shall unless repugnant to the context mean and include its successors-ininterest and permitted assignees) of the ONE PART; AND, Shri/Smt./Ku.\_\_\_\_\_\_, Son/ daughter of Shri.\_\_\_\_\_\_, Son/ daughter of Shri.\_\_\_\_\_\_\_, hereinafter called the "Probationer/employee" (which term shall unless repugnant to the context mean and include its successors-inin the tehsil of the \_\_\_\_\_\_\_\_\_, bereinafter called the "Probationer/employee" (which term shall unless repugnant to the context mean and include its successors-ininterest and permitted assignees) of the SECOND PART; AND,

District....., hereinafter called the "Surety" (which term shall unless repugnant to the context mean and include its successors-in-interest and permitted assignees) of the "THIRD PART".

AND WHEREAS Shri/Smt./Ku. ..... has been selected by the Employer as \_\_\_\_\_\_ vide its offer of appointment No. \_\_\_\_\_\_ dated \_\_\_\_\_\_ for undergoing training/probation with a view to utilize his/her service with the Employer after successful completion of the training, which offer has been unequivocally accepted by the probationer;

AND WHEREAS in terms of clause \_\_\_\_\_\_ of the Main Terms and Conditions of the said offer of appointment, the Probationer is required to undergo initial training as determined by the Employer for a period of twenty-four months, which may be extended to twelve more months in case of unsatisfactory performance by the Probationer, and to serve the Employer for a minimum period of 2 years from the date of joining on initial appointment in KVS.

AND WHEREAS in terms of clause \_\_\_\_\_\_\_ of the Main terms and Conditions of the said offer of appointment, the Probationer and his Surety are required to execute a Service Agreement cum Surety Bond on non-judicial stamp paper in favour of the Employer, undertaking to complete the training and to serve the Employer for a minimum period of two years failing which the Probationer and the Surety shall be jointly and severally bound to pay the Employer a sum of Rs.2,00,000/-(Rupees Two Lakhs only);

AND WHEREAS the Probationer recognizes and accepts that at the time of appointment as Probationer, except exposure to academic knowledge, he/she has received no formal, effective, technical or practical training enabling him/her to become professionally viable to the Employer;

AND WHEREAS the Probationer is aware that the Employer would be incurring substantial sums of money and incurring substantial costs, expenses, man hours in the process of selecting and appointing him/her as Probationer & training him/her thereafter.

AND WHEREAS this service agreement cum surety bond executed with the Employer by the Probationer along with a Surety to the extent Rs. 2,00,000 (Rs. Two lakhs only) will be used for indemnifying the Employer against all such costs as mentioned above by reason of breach and/or non-compliance of any of the terms of this agreement with by the Probationer;

AND WHEREAS the Probationer also agrees that if he/she commits any breach of any of the conditions of this agreement, the Probationer and the Surety shall be jointly and severally liable to pay to the Employer on demand immediately the above said sum of Rs. 2,00,000 (Rupees Two lakhs only) from the date of breach of the terms of the contract.

AND WHEREAS in order to secure the Employer against the expenses incurred by it on the training of the Probationer and to ensure due compliance of all terms and conditions stipulated by the Employer and accepted by the Probationer, it is agreed that the Probationer shall be liable to compensate the Employer in the manner and under the circumstances enumerated in this agreement;

IN WITNESS WHEREOF THE parties hereto have signed these presents on this date and year in the presence of the following witnesses:

WITNESSES: (For the Probationer& Surety) Clear Signature :

· · · · · · · · · · · · · · · · · · ·	
2. Name Signature of the Surety Address	
Name	
Occupation PAN No.	
Address	

(Attestation of signatures of Probationer and Surety by Gazetted Officer)

Probationer Signature of the Surety Attested Signature & seal of Gazetted Officer Signature & seal of Gazetted Officer

For office use only)

WITNESSES: (For the Employer) 1. Accepted.	Name: Address
Signature of the	
For and on behalf of KVS	

2. Address...... Name.....

## KENDRIYA VIDYALAYA SANGATHAN REGIONAL OFFICE DEHRADUN

# STATAEMENT OF MOVEABLE, IMMOVEABLE PROPERTY AND LIABILITIES

NAME OF THE CANDIDATE:	POST FOR WHICH SELECTED:
NAME OF FATHER/HUSBAND :	ADDRESS:
DETAILS OF MOVEABLE PROPERTY:-	

*		Name of Items
		Present Value in Rupees
		If not in own name than state in whose name held and his/her relationship with candidate
		Mode of acquirement (purchase/lease/ inheritance gift or otherwise)

### DETAILS OF MOVEABLE PROPERTY:-

	1	-	· .
DETAILS OF LIABILITIES:			Name of Distt, sub Division, Taluka or village in which property is situated
TIES:-			Name and details of the property house and land or other building
			Present Value in Rupees
			Present Value in If not in own name than Rupees and his/her relationship with candidate
			How acquired whether by Annual income purchase, lease mortage, from property inheritance gift or otherwise with date of acquisition and name with details of persons from whom acquired
			Annual income from property

Name of candidate: ..... Signature of Candidate with date: .....