

Latest colour  
passport size  
Photograph of  
the candidate

### **ATTESTATION FORM**

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

Name of the Department

Name of the Head of the Dept.

1. (a) Name in full (capital letters only) with aliases, if any, Please indicate if you have added / dropped at any stage any part of your name / surname.

SURNAME

NAME

- (b) Designation of the candidate with category (Appointment by Direct recruitment / Ex-Servicemen quota / compassionate ground)

(i) Designation

(ii) Place of working

(iii) Date of Entry into Service or Date of Appointment

(iv) Direct recruitment  Ex-serviceman  Compassionate

2. **Details of address:**

a. Present

b. Permanent

House / Apartment / Flat No.

Name of Apartment

Lane Name

Street & Road

Village

Mandal / Taluk

Town / City

District

State

Pin Code

Contact Phone Numbers

Mobile	Land line office (with STD code)	Landline Residence (with STD code)

(c) If originally a resident of Pakistan, the address in That Dominion and the date Of migration to Indian Union

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3. Particulars of places where you have resided during the **preceding five years** from the date of filling up of Attestation Form.

	From (Month / Year)	To (Month / Year)	Residential Address in full (i.e., House / Apartment / Flat Number, Apartment / Complex / Lane / Street / Colony and Road, Village, Mandal and District / City)	Police Station and District
1				
2				
3				
4				
5				

4. Father's details :

a) Name in full with aliases, if any

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b) Profession

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c) If in service, give designation and official address.

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d) Present postal address (if dead, give last address)

House No.	
Lane Name	
Street & Road	
Village / Mandal	
Dist.	
State	
Pin Code	

e) Permanent House Address

House No.	
Lane Name	
Street & Road	
Village / Mandal	
Dist.	
State	
Pin Code	

5. (i) Nationality of :

(a) Father

(b) Mother

(c) Wife / Husband

(ii) Place of birth of Wife / Husband

6. (a) Date of birth of the applicant

(b) Present Age

(c) Age at SSC / Matriculation

7. (a) Place of birth, District and State

(b) District and State to which you belong

8. (a) Religion

(b) Are you a member of Scheduled Caste / Scheduled Tribe / Backward Class?

Scheduled Caste

Scheduled Tribe

Backward Class

9. Education Qualifications showing places of education with years in schools and colleges since 15<sup>th</sup> year of age **(Please enclose certified copies of Study certificates and indicate whether study is regular or distance / correspondence).**

Course	Name of the school / College with full address (village / Mandal District / City)	Date of entering (mention month & year)	Date of leaving (mention month & year)	Examination passed with Reg.No. etc., (Name of the group i.e., Inter / Degree / Diploma / PG, etc)	Police Station and District
1. SSC / Matriculation					
2. Intermediate / Diploma					
3. Graduation / Professional Course					
4. Post Graduation					
5. Any other qualification					

10. If you have at any time been employed, give details. **(Please enclose certified copies of the documents)**

Designation of Post held or description of work	Period		Full Address of the office, Firm or Institution	Have you been at any time dismissed / removed from service / resigned to the post? If so, please give details
	From	To		

11	Whether you were involved in any criminal case?	Yes	No
	If yes, indicate		
	a) Crime No. and section of law		
	b) Year		
	c) Name of the Police Station		
	d) Name of the district		
	e) Whether you were arrested by the Police? (even in petty case or under preventive sections)	Yes	No
	f) Whether you were prosecuted by the Police in a court of law? if so, indicate the present stage of this case: 1) under trial    2) convicted    3) compounded    4) acquitted		
	Note: 1) If convicted whether such conviction sustained in the Court of Appeal or set aside by the Appellate Court if appealed against:		
	2) Whether you were involved in more than one criminal case ? Yes    No If yes, give details in separate paper in the above proforma		
3) If involved in a criminal case subsequent to the completion and submission of this form, the details should be informed immediately to the authority to whom the attestation form has been submitted earlier failing which it will be deemed to be suppression of factual information			

12. Name and complete addresses of two responsible persons of your locality to whom you are known or two referees to whom you are known. **(Persons shall not be blood relatives)**

	Referee - 1	Referee - 2
Name	<input type="text"/>	<input type="text"/>
House / Apartment / Flat No.	<input type="text"/>	<input type="text"/>
Name of Apartment	<input type="text"/>	<input type="text"/>
Lane Name	<input type="text"/>	<input type="text"/>
Street & Road	<input type="text"/>	<input type="text"/>
Village	<input type="text"/>	<input type="text"/>
Mandal / Taluk	<input type="text"/>	<input type="text"/>
Town / City	<input type="text"/>	<input type="text"/>
District	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Pin Code	<input type="text"/>	<input type="text"/>

13. Have you ever been member worker of any Political Party or Communal Organization / Youth / Student / Service / Labour? If so furnish details.

**DECLARATION SHOULD BE SIGNED BY THE CANDIATE**

- 1. I here by declare that the statements made in this form are true to the best of my knowledge and belief.
- 2. I am married / unmarried and have only one wife living (delete which is not applicable)
- 3. I am fully aware that furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualified and is likely to render me unfit for employment under the Government.
- 4. I am also fully aware that if it comes to notice at any time during my service that false information has been furnished or that there has been suppression of factual information in the Attestation Form, my service would be liable to be terminated solely on this ground.

**Signature of the candidate**

**Date :**

**Place :**

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

Certified that I have known Sri/Smt/Kum. \_\_\_\_\_

Son / Daughter / Wife of \_\_\_\_\_ for the last

\_\_\_\_\_ years \_\_\_\_\_ months and to the best of my knowledge and belief, the particulars

furnished by him / her are correct.

**Date :**

**Place :**

**(Signature)  
Name & Designation with seal.**

Photograph of the candidate attested by Gazetted officer / MLA / other with seal of Competent Authority.

## అభ్యర్థులకు ఆదేశాలు

### (INSTRUCTIONS FOR THE CANDIDATES)

A) ధృవీకరణ పత్రాలను పూరించండి.

Fill up the attestation forms

- i) ధృవీకరణ పత్రాలను జాగ్రత్తగా చదివి పూరించండి.  
Please read the attestation form carefully and fill the same.
- ii) వాస్తవాలను దాచిపెట్టడము లేదా వాస్తవాలను అణచిపెట్టినవారు అనర్హులుగా పరిగణింపబడతారు.  
Suppression or concealment of facts will result in disqualification.
- iii) ఏదైనా సమాచారము అబద్ధము అని, సరియైనది కాదని, అసంపూర్ణముగా ఉన్నదని తెలిసినట్లయితే, ఏదైనా సమాచారము దాచి ఉంచినట్లు తేలినట్లయితే మీ అభ్యర్థిత్వాన్ని తిరస్కరించడము లేదా రద్దుపరచడము జరుగుతుంది. మీకు నియామకపు ఉత్తర్వులు యిచ్చినప్పటికీ మీ సర్వీసును ఎటువంటి ముందస్తు నోటీసు లేకుండా ఉపసంహరింప బడుతుంది.

In the event of any information being found to be false or incorrect or incomplete, in case of suppression of any information, your candidature for the selections is liable to be rejected or cancelled and even after appointment, your services are liable to be terminated without any notice.

B) ధృవీకరణ పత్రాలు సమర్పించుటకు సమయపు పరిధి (లేదా) ఇతర సంబంధిత పత్రాలు (లేదా) వైద్య పరీక్షలకు హాజరు అగుట (లేదా) శిక్షణలో చేరుటకు సంబంధించిన వివరాలు :

Time limit for submission of attestation forms (or) other relevant documents (or) attend medical examination (or) join the training :

- i) షరతులకు లోబడి నియమింపబడ్డ అభ్యర్థులను (Provisionally Selected) ధృవీకరణ పత్రాలు, ఇతర సంబంధిత డాక్యుమెంట్స్, నిర్ణీత తేదీలో వైద్యపరీక్షలకు హాజరు కావలసిందిగా కోరడం జరుగుతుంది. అర్హత కలిగిన అభ్యర్థులు శిక్షణ పొందడానికి నిర్దేశిత తేదీ నాడు శిక్షణలో చేరవలసిందిగా కోరడం జరుగుతుంది.

The candidates who were provisionally selected will be asked to submit an attestation form, produce other relevant documents and attend medical examination on a specified date. The candidates who become eligible to be sent for training will be asked join the training on a specified date.

- ii) ఎవరైనా అభ్యర్థి పై షరతులకు ప్రతిస్పందించకపోయినా లేదా అవసరమైన ఫారాలు, ధృవపత్రాలు సమర్పించకపోయినా లేదా వైద్య పరీక్షలకు హాజరు కాకపోయినా లేదా నిర్దేశిత తేదీ నాడు శిక్షణలో చేరకపోయినా అతని షరతులతో కూడుకున్న నియామకాన్ని (Provisional Selection) అభ్యర్థికి ఎటువంటి ముందస్తు నోటీసు ఇవ్వకుండా రద్దు చేయబడుతుంది.

If any candidate fails to respond or fail to submit the necessary form or document or fail to attend the medical examination or fail to join the training on a specified date, his provisional selection may be cancelled without prior notice to the candidate.

తేదీ :  
Date :

అభ్యర్థి సంతకం  
Signature of the Candidate  
రిజిస్ట్రేషన్ నెంబర్ .....  
Reg. No. ....

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-- Nil --