

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

Attach 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)

Generated from Central KYC Registry

Retirement Adviser Code (if applicable)

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

Name of Applicant in full

Shri ✓ Smt. | | Kumari

First Name*

TRAM

Middle Name

Last Name

KUMAR

Subscriber's Maiden Name (if any)

Father's Name*

SHAYAM

KUMAR

(Refer Sr. No. 1 of instructions)

Mother's Name*

SITA

DEV1

(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*

02 / 02 / 2000

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

City of Birth*

DHANBAD

Country of Birth*

INDIA

Gender* [Please tick (✓)]

Male ✓

Female

Others

Nationality*

Indian ✓

Marital Status*

Married

Unmarried ✓

Others

Spouse Name* (If Married)

(Refer Sr. No. 1 of instructions)

Residential Status*

Indian

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

~~XXXXXXXXXX~~

Please refer Sr. No. 2 of the instructions

UID (Aadhaar)

✓

(UID/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.

3. 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*

Residential/Business

Residential

Business ✓

Registered Office

Unspecified

Flat/Room/Door/Block no.

Landmark

Premises/Building/Village

Road/Street/Lane

HIRAPUR

Area/Locality/Taluk

DHANBAD

City/Town/District

DHANBAD

PIN Code

826001

State/U.T.

JHARKHAND

4.2 PERMANENT ADDRESS DETAILS*

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

Address Type*

Residential/Business

Residential

Business

Registered Office

Unspecified

Flat/Room/Door/Block no.

Landmark

Premises/Building/Village

Road/Street/Lane

Area/Locality/Taluk

City/Town/District

PIN Code

State/U.T.

5. CONTACT DETAILS

Tel. (CN) (with STD code)

Tel. (Res) (with STD code)

Mobile* (Mandatory)

7324252486 (Mobile Number is required for communication and to get SMS alerts)

Email ID

Ram Kumar 1@gmail.com

6. OTHER DETAILS* (Please refer to Sr. no. 3 of the instructions)

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)

7. SUBSCRIBER BANK DETAILS* (Please refer to Sr. no. 4 of the instructions)

(All the bank details are mandatory except MICR Code)

Account Type [please tick (✓)]

Savings A/c ☒Current A/c ☐

Bank A/c Number

25426582902

Bank Name

SBI

Branch Name

DRM OFFICE CAMPUS

Branch Address

DRM OFFICE

PIN Code 826001

Bank MICR Code

DHANBAD

82462458

IFS Code

SBI IN 0013342

8. SUBSCRIBERS NOMINATION DETAILS* (Please refer to Sr. No. 5 of the instructions)

Name of the Nominee (You can nominate up to a maximum of 3 nominees and if you desire so please fill in Annexure III (Additional Nomination Form) provided separately)

First Name

SITA

Middle Name

Last Name

DEVI

Relationship with the Nominee

Mother

Date of Birth (In case of Minor)

Nominee's Guardian Details (in case of a minor)

First Name

Middle Name

Last Name

9. NPS OPTION DETAILS (Please tick (✓) as applicable)

I would like to subscribe for Tier II Account also YES ☐ NO ☒ If Yes, please submit details in Annexure I.

If you wish to activate Tier II account subsequently, you may submit separate application (Annexure S10) to the associated Nodal Office or to POP/POP-SP of your choice. The list of POP/POP-SPs rendering services under NPS and Annexure S10 is available on CRA website.

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

10. PENSION FUND (PF) SELECTION AND INVESTMENT OPTION* (Please refer to Sr. no. 6 of the instructions)

(i) PENSION FUND SELECTION (Tier I) : Please read below conditions before opting for the choice of Pension Funds:

- 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.
- All Citizen Model:** Subscribers under All Citizen model have the option to choose the available PFs as per their choice in the table below.
- Corporate Model:** Subscribers shall have the option to choose the available PFs as per the below table in consultation with their respective Employer.
- 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	☐	
Grifa Sunlife Pension Management Limited	☐	

* Selection of 01 Pension Fund is mandatory for All Citizen subscriber

(ii) INVESTMENT OPTION

(Please Tick (✓) in the box given below showing your investment option).

Active Choice

Auto Choice ☒

Please note:

- In case you select Active Choice fill up section (a) below and if you select Auto Choice fill up section (iv) below
- In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50).
- In case you have opted for Auto Choice and fill up section (a) 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 (Current exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Current 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 investments like CMBIS, MBS, REITs, AIFs, Inflation.
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:

1. Up to 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
2. 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.
3. 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)	Please Tick (✓)	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
Fund	Only One		
LC 75		Not available	
LC 50		Available	
LC 25			

11. 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 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:

- a) 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.
- b) 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.
- c) I permit/authorize 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.
- d) 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.
- e) 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.
- f) 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.
- g) 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.
- h) I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date 16/06/2023

Place DHANBAD

Name of subscriber RAM KUMAR

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. 6 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 16/05/2023

Place DHANBAD

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 PRAN are optional. If you intend to provide, mention any one.

PRAN (If applicable)

Group of Employee (Tick as applicable)

Group A ☐Group B ☐Group C ☐Group D ☒

Office

Department

Ministry

RAILWAY

DDO Registration Number

DTO/PAO/CDDO/DTA/PrAO Registration Number

Basic Pay

18000

Pay Scale

LEVEL - I

It is certified that the details provided in this subscriber registration form by RAM KUMAR 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 DTO/PAO/CDDO/ DTA/PrAO (In the box above)
Designation of the Authorised Person		Designation of the Authorised Person	
Name of the DDO		Name of DTO/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

CBO 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 / entnes 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 him/her 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:

(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/We further confirm that the Savings Bank a/c of Sh/Sm/Kum is not a 'Basic Savings Bank Deposit Account' (applicable in case of Bank PoP)

POP-SP Seal	Signature of Authorized Signatory	Name	Designation	Place
		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:

EAST CENTRAL RAILWAY

(FAMILY DECLARATION FORM)

1. DETAILS TO BE FURNISHED BY RAILWAY EMPLOYEE FOR EXIGENCIES

1. Name of Railway Employee : RAM KUMAR Blood Group AB⁺
2. Father's Name : SHYAM KUMAR
3. Designation : Assistant Painter
4. Family Particulars :-

Sl. No	Family Members	DOB/Age	Relation with the Railway Employee	Blood Group
1	Laxya Kumar	02/10/2002	Brother	A ⁺
2	Riya Kumari	02/05/2006	Sister	B ⁺
2	Sita Devi	01/01/1975	Mother	AB ⁺

2. Nomination for NPS

Sl. No	Nominee	DOB/Age	Relation with the Railway Employee	Percentage (%)
	Sita Devi	01/01/1975	Mother	100

Ram K. Kumar
Signature of Candidate with date

पूर्व मध्य रेल

मंडल / ईकाई : धनबाद

शपथ पत्र

मैं शिव कुमार (कर्मचारी का नाम)
(पिता/माता/पति का नाम) शिव कुमार ईश्वर के नाम पर
सत्यनिष्ठा के साथ शपथ लेती/लेता हूँ कि भारतीय रेल के कर्मचारी के तौर पर मैं संस्था
की गौरवमयी परंपरा के अनुसार इसके आदर्शों—संरक्षा, सुरक्षा, समयपालन, स्वच्छता और सेवा
को उत्तम प्राथमिकता देते हुए अपने कर्तव्यों के निर्वहन में सत्यनिष्ठा, पारदर्शिता, जवाबदेही,
निष्ठा तथा शिष्टता का ध्यान रखते हुए संविधान की सर्वोच्चता और लोकतांत्रिक मूल्यों के
प्रति वचनबद्ध रहूँगी/रहूँगा। लोकहित में कार्य करते हुए रेल के साधनों का प्रभावकारी
उपयोग और मितव्ययिता सुनिश्चित करूँगी/करूँगा।

मैं शिव कुमार (कर्मचारी का नाम) शपथ लेती/लेता हूँ कि
कोई भी ऐसा कार्य नहीं करूँगी/करूँगा जो भारतीय रेल के लिए अथवा रेल कर्मचारी के
लिए अशोभनीय हो। मैं यह भी शपथ लेती/लेता हूँ कि रेल सेवक (आचरण) नियम-1966 व
समय-समय पर जारी सभी आदर्शों व निर्देशों का पालन करूँगी/करूँगा।

दिनांक :- 16/06/2023

स्थान :- धनबाद

हस्ताक्षर :-

नाम :-

पदनाम :-

विभाग :-



शिव कुमार

Assistant Painter

OPTG.

शिव कुमार

शपथ लिया।

(नाम) Assistant Painter (पदनाम) ने मेरे समक्ष

नियुक्ति प्राधिकारी का हस्ताक्षर :-

नाम/पदनाम :-

सेवा में,

मंडल रेल प्रबंधक (कार्मिक)

पूर्व मध्य रेल, धनबाद

विषय - सेवा पुस्तिका में शैक्षणिक प्रमाणपत्र इन्द्राज करने के सम्बन्ध में,

महाशय,

मेरी नियुक्ति RRC/RRB Patna के द्वारा Assistant Painter के पद पर धनबाद मंडल में हुई है। उक्त पद हेतु न्यूनतम शैक्षणिक योग्यता Matric है जो मैंने अपने आवेदन में दिया है। किन्तु वर्तमान में उपरोक्त के अतिरिक्त मैंने निम्नलिखित शैक्षणिक योग्यताएं की अर्जित की है :-

- i) Inter
- ii) I.T.I.
- iii) Graduate (B.A)
- iv) M.A.

अतः आपसे नम्र निवेदन है कि मेरी शैक्षणिक योग्यता की उचित जांच कर उसे मेरे सेवा पुस्तिका में इन्द्राज करने की कृपा करें। इसके लिए मैं श्रीमान का सदा आभारी रहूंगा।

दिनांक -

आपका विश्वासी

(Ram)

नाम :- शिव शर्मा

पदनाम :- Asst Painter

विभाग :- ORP

दिनांक :- 16/06/2022

सत्यापन फार्म/ATTESTATION FORM

सत्यापन फार्म में सत्य सूचना देना या किसी तरह की गरी सूचना को दिखाना उम्मीदवार को अवसर प्राप्त देगी एवं वह सरकार की सेवा में नियुक्त किया जाएगा। 1/ 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.

'चेतावनी' / 'Warning'

नया कला ज्ञान, हस्ताक्षरित पासपोर्ट आकार (लगभग 5 सेमी X 7 सेमी) के हाथ के चपटे की प्रति दिखाने। / Affix signed passport size (5 cm X 7 cm approx) copy of recent photograph where asked for.

2. इस फार्म के भी जाने एवं ज्ञान देने के बाद यदि उम्मीदवार को निलंबित, निर्यात, किया गया है/ उस पर अभियोग, प्रतिबंध, नुकसान लगाया गया है, तोषी काट दिया जाता है, निलंबित किया जाता है, निलंबित कर दिया जाता है इत्यादि, तो इसका विवरण तत्काल उन अधिकारियों को, जिन्हें सत्यापन फार्म पहले भेजा गया है, भेज दिया जाना चाहिए। ऐसा न करने पर गरी तथ्य को दिखाना समझा जायेगा। / If detained, arrested, prosecuted, bound down, fined, convicted, debarred, acquitted, etc., subsequent to the completion and submission of this form, the details should be communicated immediately to the authorities to whom the attestation form has been sent early, failing which it will be deemed to be a suppression of factual information.

3. यदि व्यक्ति की नौकरी के दौरान कभी भी यह तथ्य समझे जाय कि सत्य सूचना दी गई है या सत्यापन फार्म में गरी सूचना दिखई गई है तो उस व्यक्ति की 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 a person, his services would be liable to be terminated.

1. पूरा नाम (अक्षर अक्षरों में) उपनाम के साथ, यदि कोई हो। / Name in full (in block letters) with aliases, if any. (यदि अपने किसी अवस्था में अपने नाम या कुलनाम किसी भागको बढ़ाया या घटाया हो, तो कृपया उसका उल्लेख करें।) / (Please indicate if you have added or dropped in any stage any part of your name or surname)	कुलनाम/SURNAME KUMAR	नाम/NAME RAM
2. पूरा वर्तमान पता (ग्राम-गांव, थाना एवं जिला या मकान संख्या, गली/महल्ला/सड़क एवं नगर) / Present address in full (i.e., Village Thana and District or House Number, Lane/Street/Road and Town).	Hirapur, Dhanbad Tharukhand, 826001.	
3. (क)/(a) घर का पूरा पता. (ग्राम-गांव, थाना एवं जिला या मकान संख्या, गली/महल्ला/सड़क, नगर एवं जिला प्रान्त कार्यालय का नाम) / Home address in full (i.e., Village, Thana and District or House Number, Lane/Street/Road and Town and name of District Headquarters). (ख)/(b) यदि उम्मीदवार मूल रूप से पाकिस्तान/बंगलादेश (पहले पूर्वी पाकिस्तान) का निवासी हो, तो उस देश का पता एवं वहां से भारत में विस्थापित होने की तारीख। / If originally a resident of Pakistan/Bangladesh (erstwhile East Pakistan) the address in that country and date of migration to Indian Union.	Hirapur dhanbad Tharukhand - 826001	

4. स्थानों का विवरण (निवास करने की अवधि सहित) जहां आप पिछले पांच वर्षों की अवधि में एक वर्ष से अधिक समय तक रहे हैं। विदेश में रहने के मामले में (पाकिस्तान सहित) उन सभी स्थानों का विवरण दिया जाय जहां आप 21 वर्ष की आयु के बाद एक वर्ष से ज्यादा रहे हैं। / Particulars of places (with periods of residences) where you have resided for more than one year at the 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 (ग्राम-गांव, थाना एवं जिला या मकान संख्या, गली/महल्ला/सड़क एवं नगर) / Residential address in full (i.e., Village, Thana and District or House No., Lane/Street/Road and Town).	पहले वाले कॉलम में उल्लिखित जगह के जिला प्रान्त कार्यालय का नाम। / Name of the District Headquarters of the place mentioned in the preceding column.
From Birth	Upto Now	Hirapur, dhanbad Tharukhand - 826001	Dhanbad

5	नाम/Name	राष्ट्रीयता (जन्म से या/याद निवास से) Nationality (by birth and/or by domicile)	जन्मस्थान Place of birth	व्यवसाय (यदि कोई भी है, तो इसका पता भी दे दें) Occupation (if employed give designation & official address)	वर्तमान डाक-पता (यदि मृतक के मामले में अंतिम पता) Present Postal address (if dead give last address)	स्थायी घर का पता Permanent home address
(i) पिता (यदि मृतक हो तो मृतक, यदि नहीं तो) Father (Name in full address, if any)	SHYAM KUNAL	INDIAN	Dharwad	Farmer	Hirapur Dharwad (SH)	- do -
(ii) माता/Mother	Sita Devi	"	"	Housewife	"	"
(iii) पत्नी/Wife/Husband	—	"	"	"	"	"
(iv) भाई (सहोदर) Brothers	Lagna Ram	"	"	Student	"	"
(v) बहन (सहोदर) Sisters	Rita Kunti	"	"	Student	"	"

5. (क)(ii) पुत्र (पुत्री) या/या पुत्री (पुत्रियाँ) के संबंध में सूचना यदि उनका अध्ययन/रहना दूसरे देश में हो रहा है। (Information to be furnished with regard to son(s) and/or daughter(s) in case they are studying/living in a foreign country) **NA**

नाम/Name	राष्ट्रीयता (जन्म से या/याद निवास से) Nationality (by birth and/or by domicile)	जन्मस्थान Place of birth	देश, जहाँ पढ़ाई/रहना हो रहा है, का पूरा पता Country in which studying/living with full address.	पढ़ाई के कारण से प्रेषित किया गया है या नहीं Date from which studying/living in the country mentioned in previous Column.

6. राष्ट्रीयता/Nationality	INDIAN
7. (क)(a) जन्म-दिनांक/Date of birth	02/02/2000
(क)(b) वर्तमान उम्र/Present age	25 Year
(क)(c) माध्यमिक शिक्षा के समय की उम्र/Age at Matriculation	15 Year
8. (क)(a) जन्म-स्थान जहाँ जन्म हुआ था District and State in which situated.	Dharwad Maharashtra
(क)(b) क्या वह राज्य जहाँ के आपके पिता मूलिक रूप से निवासी है। District and State to which your father originally belongs.	Yes
9. (क)(a) आपका धर्म/your religion.	HINDU
(क)(b) क्या आप आरक्षण/अनुसूचित जाति/अनुसूचित जाति के सदस्य हैं (अगर हाँ तो हाँ नहीं)। Are you a member of Scheduled Caste/Scheduled Tribe? (Answer Yes or No)	No

10. 15 वर्ष की आयु से शिक्षा स्थान और स्कूलों एवं कलेजों में बिना वर्षों के उल्लेख सहित शैक्षणिक योग्यता। (Educational qualification showing places of education with years in Schools and Colleges since 15th year of age)

कुछ पता के साथ स्कूल/कॉलेज का नाम/Name of School/College with full address	प्रवेश करने की तिथि/Date of entering	छोड़ने की तिथि/Date of leaving	अंतिम परीक्षा/Examination passed.
INTER	01/01/2012	01/01/2014	Inter
Graduate	01/01/2015	01/01/2018	B.A.

11. (क)(a) क्या आप किसी निजी या सरकारी या अर्ध-सरकारी या स्वायत्त निकाय या अन्य किसी भी संस्था में किसी भी रूप में कार्य कर रहे हैं या आपने ऐसा करने का कोई समय निर्धारित किया है, या-केंद्रीय या राज्य सरकार या अर्ध-सरकारी इकाई या स्वयंसेवक इकाई या सार्वजनिक उपकरण या निजी फर्म या संस्था। यदि हाँ तो, तो आप उस संस्था के तहत कार्य करने का पूर्ण विवरण दें। (Are you holding or have any time held an appointment under the Central or State Government or a Semi-Government or a Quasi Government body, or an autonomous body, or a public undertaking or a private firm or institution? If so, give full particulars with dates of employment upto date.)

आरंभ/Period	समाप्त/To	पदनाम, परिचय और सेवा के प्रकार/Designation, emoluments and nature of employment	निकाय का पूरा नाम एवं पता/Full name and address of employer	पिछली नौकरी छोड़ने के कारण/Reasons for leaving previous service.
		NA		

(ग)/(घ) क्या आपने पहले शासकीय/अर्ध-शासकीय सेवा में किसी भी प्रकार के कार्य किया था? यदि हाँ, तो क्या आपने किसी भी प्रकार के कार्य में भाग लिया था? / 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/University/Local Body. 101A

क्या आपने केंद्रीय नागरिक सेवा (अस्थायी सेवा) नियम, 1965 के नियम 5 या इनके समकक्ष के किसी भी नियम के तहत एक महीने की सूचना देकर सेवा छोड़ी थी क्या आपके विरुद्ध कोई अनुशासनिक कार्यवाही की गई है या किसी भी कारणों से आपकी सेवा समाप्त हो गई है? / If you had left service on giving a month's notice under 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 (i) (क)/(ग) क्या आप कभी गिरफ्तार हुए हैं? / Have you ever been arrested? हाँ/Yes / नहीं/No
- (ख)/(घ) क्या आप कभी किसी अनुशासनिक कार्यवाही में शामिल हुए हैं? / Have you ever been prosecuted? हाँ/Yes / नहीं/No
- (ग)/(घ) क्या आप कभी जमानत पर रखा गया है? / Have you ever been kept under detention? हाँ/Yes / नहीं/No
- (द)/(घ) क्या आप कभी किसी प्रकार के बंधन में रहे हैं? / Have you ever been bound down? हाँ/Yes / नहीं/No
- (इ)/(घ) क्या आप कभी किसी न्यायालय द्वारा आप पर जुर्माना लगाया गया है? / Have you ever been fined by a Court of Law? हाँ/Yes / नहीं/No
- (फ)/(घ) क्या आप कभी किसी न्यायालय द्वारा आप को दोषी ठहराया गया है? / Have you ever been convicted by a Court of Law for any offence? हाँ/Yes / नहीं/No
- (ब)/(घ) क्या आप कभी किसी परीक्षा में भाग लेने से रोका गया है या किसी विश्वविद्यालय या किसी अन्य शिक्षा प्राधिकरण/संस्थान द्वारा आप पर कोई प्रतिक्रिया लगाया गया है? / Have you ever been debarred from any examination or rusticated by any University or any other education authority/institution? हाँ/Yes / नहीं/No
- (ज)/(घ) क्या आप कभी किसी लोक सेवा आयोग/जनसेवक समिति द्वारा किसी भी परीक्षा/पदों के लिए निर्यातित किए गए हैं? / Have you ever been debarred/disqualified by any Public Service Commission/Staff Section Commission for any of its examination/selection? हाँ/Yes / नहीं/No
- (झ)/(घ) क्या इस समय आप किसी भी न्यायालय में आपके विरुद्ध कोई मुकदमा चल रहा है? / Is any case pending against you in any court of Law at the time of filling up this Attestation Form? हाँ/Yes / नहीं/No
- (ञ)/(घ) क्या इस समय आप किसी विश्वविद्यालय या किसी अन्य शिक्षा प्राधिकरण/संस्थान में आपके विरुद्ध कोई मुकदमा चल रहा है? / Is any case pending against you in any University or any other educational authority/institution at the time of filling up this Attestation Form? हाँ/Yes / नहीं/No
- (ट)/(घ) क्या आप कभी किसी अन्य प्रशिक्षण संस्थान में सेवा करने के लिए बर्खास्त/निष्काशित/बाधित किए गए हैं? / Whether discharged/expelled/withdrawn from any training institution under the Government or otherwise? हाँ/Yes / नहीं/No

12. (iii) यदि ऊपर उल्लिखित किसी प्रश्न का उत्तर 'हाँ' में है तो इस मामले में बर्तते समय मामला/गिरफ्तारी/नजरबंदी/जुर्माना/अभियोग/दंडादेश/सजा इत्यादि एवं/या न्यायालय/विश्वविद्यालय/शिक्षा प्राधिकरण/संस्थान के पास चल रहे मुकदमे के स्वरूप का पूरा विवरण दें। / If the answer to any of the above mentioned questions is 'Yes', give full particulars of the case/arrest/detention/fine/conviction/sentence/punishment, etc., and/or the nature of the case pending in the Court/University/Educational Authority, etc., at the time of filling up this form.

टिप्पणी/Note: (i) कृपया इस सत्यापन पत्र में शीर्ष पर उल्लिखित 'चेतावनी' पर ध्यान दें। / Please also see the 'warning' at the top of this Attestation Form.

(ii) प्रत्येक प्रश्न का विशेष उत्तर संक्षेप में और सत्यता के साथ देना चाहिए। जैसा मामला हो उसके अनुसार 'हाँ' या 'नहीं'। / Specific answers to each of the questions should be given by striking put 'Yes' or 'No' as the case may be.

13. अपने इनके के दो जिम्मेदार व्यक्तियों के नाम जो आपको जानते हैं। / Names of two responsible persons of your locality or two references to whom you are known.

1. Rohit Kumar

2. Hira pur Dharboud

Mithilesh Kumar

Hiranpur Dharboud

मैं प्रमाणित करता हूँ कि ऊपर उल्लिखित जानकारी सही और पूर्ण है। मैं इस जानकारी के अतिरिक्त किसी भी परिस्थिति से अनजान हूँ जो मेरी कार्यक्षमता को प्रभावित करेगी। / 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.

उम्मीदवार का हस्ताक्षर/Signature of candidate: Ran

तारीख/Date: 14/06/2023

स्थान/Place: Dharboud

हातिपुर्ति - प्रमाण पत्र/INDEMNITY CERTIFICATE

(निम्नलिखित में से किसी एक में प्रमाण पत्र पर हस्ताक्षर करवाना है) / (Certificate to be signed by any one of the following)

- केन्द्र या राज्य सरकार के राजस्व अधिकारी / Gazetted Officers of Central or State Government.
- उन क्षेत्र का प्रजासभा या विधानसभा का सदस्यदार या उनके जन्म-स्थल/निवास स्थान संबंधी है / Members of Parliament or State Legislature belonging to the constituency where the candidate or his parent/guardian is ordinarily resident.
- अधीनस्थ न्यायाधीश/अधीनस्थ / Sub-Divisional Magistrates/Officers.
- न्यायाधीशों की सभाएं या उनके कार्यों के निम्न अधिकृत न्यायाधीशों या न्यायाधीशों / Tehsildars or Naib/Deputy Tehsildars authorised to exercise magisterial powers.
- प्रमाणित विद्यालय/कॉलेज/स्कूल के प्रमुख/प्रधानाचार्य या उनके द्वारा अध्ययन की संस्था में / Principal/Headmasters of the recognised School/College/Institution where the candidate studied last.
- ग्राम विकास अधिकारी / Block Development Officers.
- ग्राम निरीक्षक / Panchayat Inspectors.

प्रमाणित किया जाता है कि मैं श्री/श्रीमती/श्रीमान / Certified that I have known Shri/Shri/Mr. RAM KUMAR
 पुत्र/पुत्री/पुत्री/daughter of Shri SHYAM KUMAR को पिछले/for the last 06
 वर्ष/years 02 से जानता हूँ कि उनके द्वारा दिये गये विवरण सही/accurate जानकारी एवं विश्वास में गयी है / months and that to the best of my knowledge and
 belief the particulars furnished by him/her are correct.

तारीख/Date 14/06/2023
 स्थान/Place Bharatpur

हस्ताक्षर/Signature : _____
 पदवर्णन या संबद्धता एवं पता
 Designation or Status and address : _____

(कार्यालय द्वारा भरा जाय/TO BE FILLED BY THE OFFICE)

- नियुक्ति - प्राधिकारी का नाम, पदवर्णन एवं पूरा पता
 Name, designation and full address of the appointing authority : _____
- पद, जिस पर उम्मीदवार को रखने के लिए विचार किया जा रहा है
 Post for which the candidate is being considered : Assistant Panchman

फोटोग्राफ
Photograph

1. पूरा नाम (सहज अक्षरों में) श्री/श्रीमती/कुमारी/Name in full (in block letters) SHRIMATI RAM KUMAR
2. पिता का नाम (सहज अक्षरों में)/Father's name (in block letters) SHYAM KUMAR
3. पति का नाम (सहज अक्षरों में)/Husband's name (in block letters) -
4. राष्ट्रियता (यदि भारत के नागरिक नहीं है तो पत्रिका प्रमाण-पत्र की संख्या तथा तारीख)/Nationality (if not a citizen of India number and date of eligibility certificate) INDIAN
5. क्या अनुसूचित जाति/जनजाति का है?/Whether a member of Scheduled Caste/Tribe? NO
6. ईसवी सन् और जहाँ कहीं सम्भव हो शक संवत् में भी उम्र को तारीख (सन्दी और अंकों दोनों में)/Date of birth by Christian Era and wherever possible also in Saka Era (both in words and figures) 02/03/1996 Second
March Nineteen Hundred Ninety Six.
7. शैक्षणिक योग्यता/Educational qualifications :-
(क) पहले नियुक्ति का समय/ (a) at the time of first appointment Matric
(ख) बाद में प्राप्त की गई/ (b) Subsequently acquired -
8. ऐसी व्यावसायिक तथा तकनीकी योग्यताएं जिनका उल्लेख उक्त 7 में न किया गया हो / Professional and technical qualification not covered by 7 -
9. शरीर के अनुपात व्यावसायिक रूप से (बिना जूतों के)/Exact height by measurement (without shoes) 5' 2"
10. पहचान का वैयक्तिक चिह्न / Personal mark of identification A Mole on Right Hand near/brow.
11. स्थायी घर का पता / Permanent Home address AT- Himpur Dhanbad, Jharkhand - 826001
12. नियुक्ति की तारीख /Date of appointment -
13. नियुक्ति का स्थान /Place of appointment -
14. नियुक्ति पर क्षमता /Capacity on appointment Assistant Pointman
15. नियुक्ति के समय वेतन एवं वेतनमान / Pay and scale on appointment 18000/- IN Level - I
16. नियुक्ति पत्र में दया दिनांक का संदर्भ /Reference to appointment letter No. & Date -
17. धर्म /Religion HINDU
18. नियुक्तिकर्ता अधिकारी का पदनाम / Designation of Appointing Authority AO
19. नियुक्तिकर्ता अधिकारी का हस्ताक्षर / Signature of the Appointment Authority Ram

सरकारी कर्मचारी के हस्ताक्षर अथवा बाएं हाथ के अंगूठे का निशान (तारीख सहित) / Signature or left thumb impression of the Government servant (with date)

साक्ष्यांकन अधिकारी के हस्ताक्षर तथा पदनाम (तारीख सहित)
Signature and Designation of attesting officer (with date)

(विचित्र होने से पहले कार्यालय-अध्यक्ष द्वारा साक्ष्यांकित किया जाना है) / (To be attested by the Head Office before pasting)

टिप्पणी/Note. सरकारी कर्मचारी को 10 वर्ष की सेवा के बाद नया फोटोग्राफ लगाना चाहिए / Photograph should be renewed after 10 years of service of Government Servant.

II. प्रमाणपत्र और साक्षात्करण / Certificate and attestation (जीओ एसओ /GS-2/संशोधित/Rev'd 98)

क्रम संख्या Sl. No.	विषय Subject	प्रमाणपत्र Certificate	प्रमाणकर्ता अधिकारी के हस्ताक्षर तथा पदनाम / Signature and Designation of the certifying officer
1	2	3	4
1	चिकित्सा परीक्षा Medical examination	<p>कार्यकारी को _____ को _____ द्वारा चिकित्सा परीक्षा की गई और वह स्वस्थ पाया गया। स्वस्थता प्रमाणपत्र पूरी तरह सुरक्षित रख दिया गया है; देखिये सेवा-पंजी के खण्ड II की क्रम संख्या _____</p> <p>The employee was medically examined by <u>Sr. DM/DH</u> on <u>04/02/2023</u> and found fit. The Medical certificate has been kept in safe custody, vide Sl. No. <u>624256</u> of volume II of the Service Book.</p>	
2	चरित्र तथा पूर्ववृत्त Character & Antecedent	<p>उसके चरित्र और पूर्ववृत्त की जांच कराई जा चुकी है और जांच रिपोर्ट पूरी तरह सुरक्षित रख ली गयी है; देखिये सेवा-पंजी संख्या _____ की क्रम संख्या _____</p> <p>His/Her character and antecedent have been verified and the verification report kept in safe custody, vide Sl. No. _____ of volume II of the Service Book.</p>	
3	संविधान के प्रति निष्ठा Allegiance to the Constitution	<p>उसने संविधान के प्रति निष्ठा की शपथ ले ली है। प्रविष्ट कर ली है, देखिये सेवा-पंजी के खण्ड II की क्रम संख्या _____</p> <p>He / She has taken the oath of allegiance / affirmation to the Constitution, vide Sl. No. _____ of volume II of the Service Book.</p>	
4	गोपनीयता की शपथ Oath of secrecy	<p>उसने सरकारी गोपनीयता अधिनियम और केंद्रीय सेवा (आचरण) नियमावली पढ़ ली है और गोपनीयता की शपथ भी ले ली है, देखिये सेवा-पंजी के खण्ड II की क्रम संख्या _____</p> <p>He / She has read of Official Secrets Act and Central Services (Conduct) Rules and has also taken the oath of secrecy, vide Sl. No. _____ of volume II of the Service Book.</p>	
5	वैवाहिक स्थिति Marital status	<p>उसने इस धिपय की घोषणा कर दी है कि उसके दो जीवित पत्नियां/पति नहीं हैं। संबंधित घोषणापत्र को सेवा-पंजी के खण्ड II के क्रम संख्या _____ पर रख दिया गया है।</p> <p>He / She has furnished declaration regarding his/her not having contracted bigamous marriage. The relevant declaration has been filed at Sl. No. _____ of Volume II of the Service Book.</p>	
6	मूल निवास स्थान संबंधी घोषणा-पत्र Declaration of home town	<p>उसने मूल निवास स्थान संबंधी घोषणा-पत्र दे दिया है जो कि स्वीकार कर लिया गया है और उसे सेवा-पंजी के खण्ड II की क्रम संख्या _____ पर रख दिया गया है।</p> <p>He / She has furnished the declaration of home town which has been accepted and filed at Sl. No. _____ of Volume II of the Service Book.</p>	
7	भाग I में इंदराजों का सत्यापन Verification of entries in part I	<p>भाग I ('जीवन-वृत्त') की क्रम संख्या 5-8 के सामने किये गये इंदराजों के सही होने का सत्यापन मूल प्रमाणपत्रों से जो कि संबंधित उद्देश्यों के साक्ष्य के वैध दस्तावेज माने जाते हैं, किया जा चुका है। इन प्रमाणपत्रों की साक्षात्कृत प्रतियां सेवा-पंजी के खण्ड II के क्रम संख्या _____ पर रख दी गयी हैं।</p> <p>The correctness of the entries against Sl. Nos. 5-8 of part I "Bio-Data" has been verified from original certificates considered as valid documentary evidence of the respective purpose. Attested copies of these certificates have been filed at Sl. Nos. _____ of Volume II of the Service Book.</p>	