

**ATTESTATION FORM**

Affix recent signed  
passport size (3.5 X  
3.5) photograph

**W A R N I N G**

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. 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 suppression of factual information.

3. 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 the notice at any time during the service of a person his services would be terminated.

1. Name in full (in BLOCK CAPITAL LETTERS) with aliases if any (please indicate if you have added or dropped in any stage any part of your name or surname)

<u>SURNAME</u>	<u>NAME</u>

2. Present address in full i.e. Village, Thana and District or House Number, Lane / Street / Road and Town

3. Home address in full i.e. Village, Thana and District or House Number, Lane / Street / Road and Town and name of District Headquarters

(b) If originally a resident of Pakistan, the address in that country and the date of migration to Indian Union

Contd. ....

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.

<b>From</b>	<b>To</b>	<b>Residential address in full (i.e. Village, Thana and District or House No. / Lane / Street / Road and Town)</b>	<b>Name of the District Headquarters of the place mentioned in the preceding column)</b>

4.

	<b>Name</b>	<b>Nationality (by birth and or by domicile)</b>	<b>Place of birth</b>	<b>Occupation (if employed, give designation &amp; official address)</b>	<b>Present postal address, if dead, give last address</b>	<b>Permanent Home address</b>
(i) Father (Name in full aliases if any)						
(ii) Mother						
(iii) Wife / Husband						
(iv) Brother(s)						
(v) Sister(s)						

5. (a) Information to be furnished with regard to son(s) and / or daughter(s) in case they are studying / living in a foreign country.

<b>Name</b>	<b>Nationality (by birth and / or by domicile)</b>	<b>Place of birth</b>	<b>Country in which studying / living with full address</b>	<b>Date from which studying / living in the country mentioned in previous column</b>

Contd. ....

6. Nationality :
7. (a) Date of birth (in Christian era) :  
 (b) Present age :  
 (c) Age as Matriculation :
8. (a) Place of birth, District and State in which situated :  
 (b) District and State of which belong :  
 (c) District and State to which your father belongs :
9. (a) Your Religion :  
 (b) Are you a member of Scheduled Caste / Scheduled Tribe? Answer 'Yes' or 'No' :
10. Educational qualification showing places of education with years in school and college since 15 years of age: -

<b><i>Name of School / College with full address</i></b>	<b><i>Date of entering</i></b>	<b><i>Date of leaving</i></b>	<b><i>Examination passed</i></b>

11. (a) Are you holding or have any time held appointment under Central or State Government or Semi-Government or a quasi Government body, or any Autonomous body, or a Public undertaking, or a Private firm or Institution? If so, give full particulars with dates of employment, up-to-date.

Period		Designation, employments & nature of employment	Full name and address of employer	Reasons for leaving previous service
From	To			

- (b) If the previous employment was under the Government of India / State Government / an undertaking owned or controlled by the Government of India or State Government / an Autonomous body / University local body. If you had left service on giving a month's notice under Rule 5 of the Central Civil Service (Temporary Service) Rules, 1965 or any similar corresponding rules where any disciplinary proceeding framed against you or had you been called upon to explain your conduct in any matter at the time you give notice of termination of service, or a subsequent date, before your service actually terminated?

Contd. ....

- |     |     |   |          |
|-----|-----|---|----------|
| (i) | (a) | Have you ever been arrested?  | Yes / No |
|     | (b) | Have you ever been prosecuted?  | Yes / No |
|     | (c) | Have you ever been kept under detention?  | Yes / No |
|     | (d) | Have you ever been found down?  | Yes / No |
|     | (e) | Have you ever been fined by a Court of Law?   | Yes / No |
|     | (f) | Have you ever been convicted by a Court of Law for any offence?   | Yes / No |
|     | (g) | Have you ever been debarred from any examination or rusticated any University or any other educational authority / Institution?                     | Yes / No |
|     | (h) | Have you ever been debarred / disqualified by any Public Service Commission / Staff Selection Commission for any of its examination / selection?    | Yes / No |
|     | (i) | Is any case pending against you in any Court of Law at the time of filling up this Attestation Form?  | Yes / No |
|     | (j) | Is any case pending against you in any University of any other educational authority / Institution at the time of filling up this Attestation Form? | Yes / No |
|     | (k) | Whether discharged / expelled / withdrawn from any training Institution under the Government or otherwise?  | Yes / No |
- (ii) If the answer to any of the above mentioned question 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.

**NOTE :**

- (i) Please also see the 'Warning' at the top of this Attestation Form.
- (ii) Specific answer to each of the questions should be given by striking out 'Yes' or 'No' as the case may be.

12. Name of two responsible persons of your locality of two reference to whom you are known

1.

2.

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

Signature of candidate \_\_\_\_\_

Contd. ....

**IDENTITY CERTIFICATE**

***(Certificate to be signed by any one of the following)***

- i) Gazetted Officer of Central or State Government.
- ii) Members of Parliament of State Legislative belonging to the constituency where the candidate or his parent / Guardian is originally residing.
- iii) Sub-Divisional Magistrate / Officers.
- iv) Teshilders of Naib / Deputy Teshilders authorized to exercise magisterial powers.
- v) Principal / Head Master of recognized School / College / Institution where the candidate studied last.
- vi) Block Development Officer.
- vii) Post Master.
- viii) Panchayet Inspectors.

Certified that I have known Shri / Smti \_\_\_\_\_  
son / daughter / wife of Shri / Late \_\_\_\_\_  
for the last \_\_\_\_\_ years \_\_\_\_\_ months and that to the  
best of my knowledge and behalf the particulars furnished by him / her are correct.

Date .....

Signature .....

Designation or status & address

**TO BE FIELD BY THE OFFICE**

- i) Name, designation and full address of the appointing authority.
- ii) Post for which the candidates is being considered.

**Prof.(Dr.) Sanjib Kumar Debbarma  
Director of Health Services  
Govt. of Tripura**

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Contd. ....

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Contd. ....



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|     | (d) | Have you ever been found down?  | Yes / No |
|     | (e) | Have you ever been fined by a Court of Law?   | Yes / No |
|     | (f) | Have you ever been convicted by a Court of Law for any offence?   | Yes / No |
|     | (g) | Have you ever been debarred from any examination or rusticated any University or any other educational authority / Institution?                     | Yes / No |
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**NOTE :** (i) Please also see the 'Warning' at the top of this Attestation Form.

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- v) Principal / Head Master of recognized School / College / Institution where the candidate studied last.
- vi) Block Development Officer.
- vii) Post Master.
- viii) Panchayet Inspectors.

Certified that I have known Shri / Smti \_\_\_\_\_  
son / daughter / wife of Shri / Late \_\_\_\_\_  
for the last \_\_\_\_\_ years \_\_\_\_\_ months and that to the  
best of my knowledge and behalf the particulars furnished by him / her are correct.

Date .....

Signature .....

Designation or status & address

**TO BE FIELD BY THE OFFICE**

- i) Name, designation and full address of the appointing authority.
- ii) Post for which the candidates is being considered.

**Prof.(Dr.) Sanjib Kumar Debbarma  
Director of Health Services  
Govt. of Tripura**

**CHARACTER CERTIFICATE (1)**

Certified that I have known Shri / Smti \_\_\_\_\_  
\_\_\_\_\_, Son/daughter/wife of Shri / Late \_\_\_\_\_ for  
last \_\_\_\_\_ years \_\_\_\_\_ months and that to the best of my  
knowledge and belief he / she bears reputable character and has no antecedent  
which render him / her unsuitable for Government employment.

2) Shri / Smti \_\_\_\_\_ is not related  
to me.

Date: \_\_\_\_\_ Signature

Place: \_\_\_\_\_ Designation

.....  
**Form of oath of allegiance for Indian Nations**

I, Shri / Smti \_\_\_\_\_ do swear / solemnly  
affirm that I will be faithful and bear true allegiance to India and to the Constitution  
of India and by law established and that I will carry out the duties of my office  
loyally, honestly and with impartiality.

SO HELP ME GOD.

Date : \_\_\_\_\_ Signature

Place :

.....  
**CHARACTER CERTIFICATE (2)**

Certified that I have known Shri / Smti \_\_\_\_\_,  
Son / daughter / wife of Shri / Late \_\_\_\_\_ for last  
\_\_\_\_\_ years \_\_\_\_\_ months and that to the best of my  
knowledge and belief he / she bears reputable character and has no antecedent  
which render him / her unsuitable for Government employment.

2) Shri / Smti \_\_\_\_\_ is not related  
to me.

Date : \_\_\_\_\_ Signature

Place : \_\_\_\_\_ Designation

**DECLARATION**

Shri / Smti \_\_\_\_\_ declare as under.

- (i) That I am a bachelor / widow.
- (ii) That I am married and have only one wife living.  
That I am married to a person who has no other wife living.
- (iii) That I am married and have more than one wife.  
That I am married to a person who has another wife living.

I request that in view of the reasons stated below, I may be granted exemption from the operation of restriction of the recruitment to service of persons having more that one wife or having married to a person having more that one wife living.

2. I solemnly affirm that the above declaration is true and I 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.

**R E A S O N**

Date : \_\_\_\_\_ Signature \_\_\_\_\_

Place : \_\_\_\_\_

.....

**Medical Certificate of Fitness for  
first entry into Government Service**

I hereby certify that I have examined \_\_\_\_\_ a candidate for employment in the \_\_\_\_\_ Department, and can not discover that he / she has any disease (communicable or otherwise), constitutional weakness or bodily infirmity except \_\_\_\_\_. I do not consider this a disqualification for employment in the office of the Department. His / her age, according to his / her statement is \_\_\_\_\_ years and by appearance \_\_\_\_\_ years.

Date : \_\_\_\_\_ Signature \_\_\_\_\_

Place : \_\_\_\_\_ Designation \_\_\_\_\_

\* The word 'do not' should be scored but if the candidate is considered disqualified for Government service.

**A N N E X U R E - I I**

**(A) BIO-DATA :-**

1. Name of the candidate (in BLOCK LETTERS) :
2. Father's Name :
3. Name of husband (if applicant is married) :
4. Permanent Home Address :
  
5. Present Address :
  
6. Date of Birth (attested copy of age proof certificate is to be affixed) :
7. Academic Qualification :

Name of Examination	Name of Board / University	Year of Passing

8. Whether name is registered under local employment exchange, if so,, number & date of registration etc. (Employment Exchange Card is to be affixed)

**(B) ECONOMIC DATA :-**

1. In case of married women :

(a) If Father-in-Law, Mother-in-Law & Husband are in Government employment or business:

	<b>Nature of Employment</b>	<b>Total Salary Income of each per month</b>	<b>Whether living separately</b>
Father-in-Law			
Mother-in-Law			
Husband			

(b) Number of Brother-in-Law, Sister-in-Law living in the family and nature of employment with income :

	<b>Number</b>	<b>Nature of Employment</b>	<b>Total Salary / Income of each per month</b>
Brother-in-Law			
Sister-in-Law			

(c) Income of others :

(a) Total no. of own brother(s) & unmarried sister(s)

(b) If father / mother are in service, give their particulars :-

- i) Father :-
- ii) Mother :-

<b>Nature of Employment</b>	<b>Total Salary / Income of each per month</b>

Contd. ....

2. In case of male and unmarried female candidate :

(a) If father / mother is / are in service, give their particulars :

	<b>Nature of Employment</b>	<b>Total Salary / Income of each per month</b>
Father		
Mother		

(b) If own brother(s) / unmarried own sister(s) are in service, give their particulars :

	<b>Number</b>	<b>Nature of Employment</b>	<b>Total Salary / Income of each per month</b>
Own brother(s) employed			
Unmarried sister(s) employed			

3. Total monthly income from Landed Property / Agriculture / Business (if any) :

4. Whether he / she himself / herself is employed in any Government service

i) Nature of service / employment :

ii) Date of employment :

iii) Scale of pay :

I, Shri / Smti \_\_\_\_\_ do hereby declare that all the particulars and information given above are true to the best of my knowledge and understand that in the event of the declaration is found to be incorrect in verification after my appointment to the post of \_\_\_\_\_ under the Directorate of Health Services, Government of Tripura, Agartala, I shall be liable to be dismissed from service forthwith without assigning any reason thereof.

**R E A S O N**

Place :

Date :

Signature of the candidate with full address  
House No(if any)  
Vill:-  
Landmark:-  
P.O:-  
P.S:-  
Sub-Division:-  
District:-  
Pin:-  
Ph:-  
Email Id:-

**A N N E X U R E - I I I**

**FORM TO BE FILLED BY THE GOVERNMENT EMPLOYEES ON FIRST APPOINTMENT**

(A) Close relations who are nationals of or are domiciled in other country.

	<b>Name</b>	<b>Nationality</b>	<b>Present Address</b>	<b>Place of Birth</b>	<b>Occupation</b>
Father					
Mother					
Wife / Husband					
Daughter (s)					
Son (s)					
Sister (s)					
Brother (s)					

(b) Close relation Resident in India who are of non India origin.

	<b>Name</b>	<b>Nationality</b>	<b>Present Address</b>	<b>Place of Birth</b>	<b>Occupation</b>
Father					
Mother					
Wife / Husband					
Daughter (s)					
Son (s)					
Sister (s)					
Brother (s)					

If in public service, give full particulars regarding designation of the post hold, name of Department / Office etc. where employee and date of such employment.

I certify that the foregoing information is correct complete to the best of my knowledge and belief.

Date :

Place :

Signature of the candidate

Note :- (1) Suppression of information in this form will be consider a major departmental offences for which punishment may extended to dismissal from service.

(2) Subsequent changes, if any in the above data should be reported to the Head of Office / Department, at the end of each year.

**U N D E R T A K I N G**

I do hereby declare that I am ready to serve in any part of the State of Tripura after my appointment in exigencies of public service and will abide by the decision of the Government from time to time and when required.

Date :

Place :

Signature of the candidate

## **UNDERTAKING**

“I understand and accept the Government servants joining the service of the State Government on or after 01-07-2018 shall not be governed by the existing central Civil Service (Pension) Rules, 1972 (as adopted in the state of Tripura) and order issued thereunder from time to time and that their pension and other retirement benefits will be governed by a set of new pension Rules, which are being formulated in line with the contributory pension Scheme announced by Government of India and going to be notified In due course”

Signature of the incumbent concern

**Name in CAPITAL LETTER** :-

**Designation** :-

**Date** :-

**Present Place of Posting(for official Use):-** \_\_\_\_\_