आरआरसी द्वारा प्राप्त पैनल के अभ्यर्थियों के सम्बन्ध में सूचना

रेलवे भर्ती बोर्ड -इलाहाबाद की नोटिफिकेशन सं0 सीईएन-आरआरसी 01/2019 के अर्न्तगत लेवल 01 में चयनित अभ्यर्थियों में से जिन अभ्यर्थियों का पैनल प्रयागराज मण्डल को प्राप्त हुआ है । पैनल्ड अभ्यर्थियों को दस्तावेज सत्यापन हेतु बुलाया जा रहा है। अभ्यर्थियों को दस्तावेज सत्यापन के सम्बन्ध में निम्न निर्देश अंकित किये जाते है।

- सभी अभ्यर्थियों दस्तावेज सत्यापन हेतु बुलाया जा रहा है । बुलावा पत्र (काललेटर) शीघ्र बेवसाइट में अपलोड किये जायेगें । बेवसाइट का अवलोकन करते रहे ।
- 2. आरआरसी/प्रयागराज ने दस्तावेज सत्यापन के समय जो किमयां अंकित की गयी है के सम्बन्ध में प्रमाणित सांक्ष्य साथ लाना अनिवार्य है ।
- 3. सभी अभ्यर्थियो का दस्तावेज सत्यापन के उपरान्त HRMS पोर्टल में (आन बोर्डिंग किया जाना है जिसके लिये निम्न दस्तावेजों का पीडीएफ अपने स्मार्ट मोबाईल में बनाकर लाना अनिवार्य है।
 - (1) जन्म प्रमाण (हाई स्कूल का प्रमाण पत्र) (2)पैन कार्ड , (3) आधार कार्ड,
 - (4) मेडिकल फिट मेमो (आफिस में उपलब्ध कराया जायेगा) (5) न्यूनतम शैक्षिणक योग्यता
 - (6) एन पी एस (एस -1 फार्म) (7)फोटो (जे पी एफ फार्मेट)
 - (8) साक्ष्यांकन फर्म (जो दो एम बी से कम हो)
 - (9) चरित्र प्रमाण पत्र (10) शपथ पत्र , (11) मैन्डेट फार्म , (12) अन्य शैक्षणिक प्रमाण पत्र (13)जाति प्रमाण पत्र , (14) नाम से जारी चेक की छायाप्रति ।
- 4. सभी अभ्यर्थियों को सूचित करना है कि सभी वांछित प्रपत्र जैसे (1.) शैक्षणिक /तकनीकी अंकपत्र / प्रमाण पत्र की दो छायाप्रतियां (एक सेट स्वप्रमाणित एवं एक सेट राजपत्रित अधिकारी द्वारा प्रमाणित) साथ में लाना अनिवार्य है ।
- 5. दो चरित्र प्रमाण पत्र जो अन्तिम संस्थान के प्रधानाचार्य /भारत सरकार / राज्य सरकार के राजपत्रित अधिकारी द्वारा जारी चरित्र प्रमाण पत्र लाना अनिवार्य है ।
- 6. साक्ष्यांकन फार्म की मूलप्रति तीन प्रतियां भरकर लाना अनिवार्य है ।
- 7. दिये गये हलफनामा के प्रारूप को 10 /- के नोटरी स्टाम्प पेपर पर हलफनामा लाना अनिवार्य है
- 8. OBC एवं EWS के अर्न्तगत चयनित अभ्यर्थियों को एक वर्ष के अन्तराल का बना हुआ जाति प्रमाण पत्र लाना अनिवार्य है ।

उपरोक्त के अतिरिक्त यह भी सूचित करना है सूची में जिन अभ्यर्थियों का नाम सूची में अंकित नहीं है वे अपने प्रपन्न तैयार रखें तथा बेवसाइट का अवलोकन करते रहे । सूचना बेवासाइट में अपलोड की जायेगी।

(नितिन सिंह)

सहायक कार्मिक अधिकारी कृते मण्डल रेल प्रबन्धक /का0 उत्तर मध्य रेलवे, प्रयागराज

अभ्यर्थियों के लिए अनुदेश

1 अभ्यर्थी निम्नलिखित मूल प्रमाण पत्र स्व—प्रमाणित तथा उसकी एक प्रति राजपत्रित अधिकारी से अभिप्रमाणित कराकर अपने साथ अवश्य लायें

(a) सभी शैक्षिक / तकनीकि योग्यताओं (10वीं स्तर एवम् उपर) के अंकपत्र / प्रमाण पत्र

(b) जन्म तिथि का प्रमाण पत्र (10वीं पास का प्रमाण पत्र), जन्म तिथि का प्रमाण पत्र के अभाव में अभ्यर्थी की उम्मीदवारी निरस्त कर दी जाएगी।

(c) अ.जा. / अ.ज.जा. / अ.पि.जा के लिए सक्षम अधिकारी द्वारा जारी किया गया जाति प्रमाण पत्र, अपिजा के अभ्यर्थियों के लिए भारत सरकार के अधीन सेवाओं के लिए लागू जाति प्रमाणपत्र प्रस्तुत करना अनिवार्य हैं, जो एक वर्ष से अधिक पुराना न हो।

(d) दो चरित्र प्रमाण पत्र जिसे अलग-अलग दो राजपत्रित अधिकारी ने जारी किया हो, साथ लायें ।

(e) लिखित परीक्षा के प्रवेश पत्र की आधी प्रति ।

(f) सरकारी कर्मचारियों के मामले में नियन्त्रक अधिकारी से अनापत्ति प्रमाण पत्र लाना अनिवार्य है ।

(q) आवेदन पत्र पर चिपकाये गये फोटो के समरुप एक ही प्रकार के दस फोटो प्रतियां लाना है।

(h) पत्र के साथ संलग्न साक्ष्याकंन फार्म (PVR Form) की दो प्रतियां फोटोस्टेट कराकर तीन प्रतियों में मूल रूप से भरकर साथ लायें । साक्ष्यांकन फार्म पर चिपकाये गये फोटो राजपत्रित अधिकारी से अभिप्रमाणित कराकर अपने साथ लायें।

(i) आधार कार्ड की छाया प्रति साथ लायें।

- 2 इस पत्र के साथ संलग्न सपथ पत्र के प्रारुप के अनुसार हलफनामा बनवाकर मूलरुप से लायें एवम् वायोडाटा को भर कर साथ लायें 1
- 3 मांगे गये वैध दस्तावेजों के साथ, दस्तावेज सत्यापन केन्द्र पर समय से पहुँचे इसके अभाव में आपकी उम्मीद्वारी निरस्त कर दी जाएगी ।
- 4 दस्तावेज सत्यापन केन्द्र / दस्तावेज सत्यापन की तिथि में परिवर्तन हेतु किसी प्रकार का अनुरोध स्वीकार नहीं किया जाएगा ।
- 5 अभ्यर्थियों को आने जाने एवम ठहरने इत्यादि के लिए सभी खर्च स्वयं वहन करने होगें । आवश्यक होने पर कार्मिक शाखा में अगले दिन भी बुलाया जा सकता है तदनुसार इलाहाबाद में एक या दो दिन रुकने कें लिए तैयार होकर आयें ।
- 6 अभ्यर्थी अपने साथ पैन कार्ड तथा कोर बैकिंग का डिटेल (IFSC/MICR CODE) अपने साथ सलग्न प्रारुप में लायें ।
- 7 दस्तावेज सत्यापन हेतु किसी अभ्यर्थी को बुलाने मात्र से ही किसी भी प्रकार का उसे रेलवे में नियुक्ति का हक नहीं प्राप्त हो जाता ।

अभ्यर्थियों को निर्देशित किया जाता है कि यह सुनिश्चित करें कि उनके द्वारा प्रस्तुत प्रमाण पत्रों में किसी भी प्रकार की त्रुटि जैसे नाम, पिता का नाम, जन्म तिथि आदि सही हो । इसके अभाव में उम्मीदवारी निरस्त कर दी जाएगी ।

जस नाम, ापता का नाम, जन्म ाताव्य आदि रहा है। । इसके जनाव न उन्तावित एरस कर से जन्म में 9 प्रवेश पत्र पर पासपोर्ट साइज की फोटो लगायें तथा हस्ताक्षर ऐसा करें कि हस्ताक्षर का कुछ भाग फोटो और प्रवेश पत्र दोनों पर आ जाये अन्यथा अभ्यर्थी को वेरीफिकेशन में सम्मिलित होने की अनुमित नहीं दी जाएगी ।

10 उम्मीदवार को बुलावा पत्र का निचला भाग सम्भाल कर रखना है ताकि बाद में निर्देश दिए जाने पर वह प्रस्तुत कर सके, इसके अभाव मे उम्मीदवारी निरस्त कर दी जाएगी ।

11 अभ्यर्थी इस बात का ध्यान रखें कि चयन प्रकिया के किसी भी स्तर पर अयोग्य पाए जाने पर या जन्म तिथि सम्बन्धित साक्ष्य गलत पाए जाने पर अथवा आवेदन पत्र में उनके द्वारा की गयी घोषणा गलत अथवा अपुर्ण पाए जाने पर उनकी पात्रता समाप्त करने अथवा नियुक्त हो जाने पर उनकी सेवा समाप्त करने का अधिकार रेल प्रशासन को है ।

12 किसी भी प्रकार की सिफारिश किये जाने पर या किसी प्रकार के कदाचार में लिप्त पाऐ जाने पर अथवा अनुचित साधनों का प्रयोग करने पर उम्मीदवार अयोग्य घोषित होगा ।

- 13 किसी भी समय यदि आपकी पात्रता गलत पायी जाती है तो आपकी उम्मीदवारी रदद कर दी जाएगी ।
- 14 सभी प्रकार के मामलों में रेल प्रशासन का निर्णय अन्तिम होगा ।

15 इन निर्देशों का उल्लंघन करने पर अभ्यर्थी की पात्रता निरस्त हो जाएगी ।

16 इस प्रत्र के साथ संलग्न आफर आफ एप्वाईटमेंट की शर्ते स्वीकार हो तो स्वीकृत कर दस्तावेज सत्यापन के समय प्रस्तुत करे।

इस प्रवेश पत्र के प्रस्तुत करने पर अनुसूचित जाति अथवा अनुसूचित जन जाति के अभ्यर्थी रेलवे के द्वितीय श्रेणी में निकटतम रेलवे स्टेशन से दस्तावेज सत्यापन केन्द्र तक तथा वापसी की यात्रा मुफ्त के लिए पात्र होंगे ।

नोट— समस्त अभ्यर्थियों को कोविड — 19 के संक्रमण के कारण आगाह किया जाता है कि इस सम्बन्ध में भारत सरकार द्वारा जारी गाइड लाइन का पूर्णतः पालन करेंगे एवं डाक्यूमेन्ट वेरीफिकेशन के समय मास्क, सेनेटाइजर का प्रयोग करेंगे एवं सोशल डिस्टेसिंग का पालन करेंगे । यदि कोई अभ्यर्थी उक्त बीमारी से संक्रमित है तो उसे मण्डल कार्यालय आने की आवश्यकता नहीं है । यदि ऐसा कोई अभ्यर्थी संक्रमण की स्थिति में मण्डल कार्यालय में प्रवेश करता है तथा यहाँ जांच के उपरान्त इसकी जानकारी होती है तो उसके विरूद्ध महामारी एक्ट के अन्तिगत नियमानुसार कार्थवाही की जायेगी ।

CHARACTER CERTIFICATE

HEAD OF EDUCATIONAL INSTITUTION LAST ATTENDED OR GAZATTED OFFICER

(For Group C Non-sensitive Service)

				and daughter of
	Certified that I know Shri/Smt/Kumari	ne last y	20050	months and that
Shri_	best of my knowledge and belief he/she	ne last y hears_reputable_chara	earsacter and ha	s no antecedents
to the which	may render him/her unsuitable for Governr	ment employment.		
	Shri/Smt/Kumari	is not relate	ed to me.	
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	Shri/Smt/Kumari	is not rela	ted to me.	
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Designation

Seal

Date:

शपथ पत्र का प्रोफार्मा - अभ्यर्थी इस शपथ पत्र को बनवाकर लायें

मण्डल रेल प्रबन्धक उ०म०रे०, इलाहाबाद

लेकर	मैं शपथकर्ता —————वल्द श्री ———— साकिन मकान सं0—————ईष्वर की शपथ निम्नलिखित बातों की घोषणा करता हूँ जो सही है :—
1	यह कि मेरा नाम —————है, मेरे पिता का नाम श्री————— है, मैं मकान न0 —————— जिला————— का निवासी हूँ ।
2	यह कि मेरी जन्मतिथि ———— है तथा मेरी शैक्षिक योग्यता———— है ।
	यह कि मेरे विरुद्ध किसी भी प्रकार का आपराधिक वाद किसी भी थाने में दर्ज नहीं है और न ही किसी न्यायालय में कोई आपराधिक वाद से सम्बन्धित मुकदमा विचाराधीन है ।
4(क)	यह कि मैं विवाहित हूँ , आज की तिथि में मेरी एक ही पित्न जीवित है, और भविष्य में विना पूर्व प्रशासनिक अनुमति के दूसरी विवाह नहीं करुंगा।
(ख)	यह कि मैं अविवाहित हूँ।
5	मेरे द्वारा दी गयी सभी जानकारी, सभी शैक्षिक योग्यता कें प्रमाण पत्र तथा अन्य प्रपत्र सही है, यदि इनमें कोई भी

5 मेरे द्वारा दी गयी सभी जानकारी, सभी शैक्षिक योग्यता कें प्रमाण पत्र तथा अन्य प्रपत्र सही है, यदि इनमें कोई भी कभी या विरोधाभास पाया जाता है, तो उसके लिये मैं स्वयम् जिम्मेदार रहूँगा तथा मेरी उम्मीदवारी विना किसी सूचना के निरस्त कर दी जाये तथा रेल प्रशासन द्वारा मेरे पक्ष मे भूगतान की गयी सभी राषि की वसूली की जाये । इनके साथ ही प्रशासनिक व आपराधिक मामलों के लिए मैं स्वयम् जिम्मेदार रहूँगा ।

मै शपथकर्ता उपरोक्त वहलफ तसदीक करता हूँ कि शपथ पत्र की धारा 1 लगायत 4 मेरी निजी जानकारी में सच व सही है, इसमें न कुछ ज्ञूट है और न ही कुछ छुपाया गया है ।

ईश्वर मेरी मद्द करें

नोट-जो अभ्यर्थी अविवाहित हैं वह उपरोक्त 4(ख) का तथा जो अभ्यर्थी विवाहित हैं वह 4(क) में अंकित घोषणा को सपथ पत्र में टाइप करायें।

दिनांक ः

शपथकर्ता के हस्ताक्षर

1		<u>षा</u> नाम —————	<u> याडाटा - इस अम्यथा स्वयम् भरकर साथ लाय</u>
2		पिता का नाम	
<u></u>		जन्मतिथि —————	
4		जाति उप	ग्जातिSC / ST / OBC / UR
5		पता	
6		आधार नम्बर	······································
7		पैन नम्बर	
8		मोबाइल नम्बर	· · · · · · · · · · · · · · · · · · ·
		पहचान चिन्ह - तिल और मस्सा	का उल्लेख नहीं करना है
	1		
-	2		
			अभ्यर्थी के हस्ताक्षर

Office of the Divisional Railway Manager (P) NCR Prayagraj Division

अनुबन्ध - I

जी-413 एफ / परिशोधित 66

	ANNEXURE-I	G-413-F/Revised 66
File No.:	- S	
Date:		फोटो को राजपत्रित
Deptt.:		अधिकारी द्वारा
Category:		सत्यापित करायं
	साक्ष्यांकन फार्म	
	ATTESTATION FORM	

चेतावनी:- साक्ष्यांकन फार्म में गलत जानकारी देना या वास्तविक जानकारी छिपाना आयोग्यता समझी जायेगी और इससे उम्मीदवार सरकारी सेवा के आयोग्य भी ठहराया जा सकता हैं।

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, वंचित किया गया हो आदि, तो उसे इसके बारे में लोक सेवा आयोग या रेल सेवा आयोग या उस अधिकारी को, जिसको पहले साक्ष्यांकन पत्र भेजा गया हो. जैसी स्थिति हो. शीघ्र लिख देना चाहिये अन्यथा यह समझा जायेगा कि वास्तविक जानकारी छिपाई 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 Service 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 it will be deemed to be a suppression of factual information.

3. यदि नौकरी के दौरान किसी भी समय साक्ष्यांकन पत्र में यह पाया गया कि गलत जानकारी दी गई है या वास्तविक जानकारी छिपायी गई 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 लिखे, यदि किसी समय अपने नाम या कुल नाम में कभी कुछ जोड़ा या घटाया हों) (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 (अर्थात् ग्राम, थाना और जिला या मकान नम्बर, गली, 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 गली / 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 Headquarters) (ख) यदि पाकिस्तान का मूल निवासी हो तो वहां का पता और भारतीय संघ में आने की तारीख। (b) If originally a resident of Pakistan, the address in the Country and the date of migration to Indian	¥.	

4. स्थानों का निवारण निवास की अवधि सहित जहां अपने पांच वर्षों में एक स्थान पर एक वर्ष से अधिक समय तक निवास किया हैं। यदि विदेश (पाकिस्तान सहित) में रहें हों, तो उन सभी स्थानों का विवरण दिया जाना चाहिए जहां उम्मीदवार 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 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 तक कि प्राप्ता क्षा पूरा पता (अर्थात्—मान्), याना और जिला में प्राप्ता के जिला मुख्यालय का नाम पता निकल के जिला मुख्यालय का नाम Residential address in full (i.e. Village, Thana and Distt. or House No. Lane/Street/Road and (Town) 5. चिता का /Father's:- (क) पूरा नाम, उर्फ नामी सहित, यदि हो। (a) Name in full with aliases, if any. (a) वर्तमान डाक का पता (यदि मृत हो तो अतिम पता तिल्लें) (b) Present postal address (if dead, last address) (ग) पर का स्थार्थी पता (c) Permanent Home Address. (घ) यवसाय (d) Profession (उ) यदि सेवा में हो तो पदनाम और कार्यालय का पता तिल्लें। (e) If in service, give designation and official address. 6. राष्ट्रीयला— (i) Nationality of: (क) पिता (a) Father (a) माता (b) Mother (b) Mother (c) Husband/Wife (d) (d) (d) (d) (d) (d) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	should be given.			पिछले कालम में दिये गये
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		म स्थान	(II)	
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7. (क) जन्म तिथि						
(a) Date of birth		(क) (a)				
(ख) वर्तमान आयु		(य) (ख)				
(b) Present age (ग) मैट्रिक उत्तीर्ण करने की आयु		(b)				
, ,		(刊)	2000			
(c) Age of Matriculation.		(c)				
8. (क) जन्म स्थान, जिला और राज्य वि	जेसमें स्थित ह	ो				
(a) Place of birth, District and S	State in whic					
situated.		(a)				
(ख) जिला और राज्य जिसमें निवासी	हों	(ख)				
(b) District and State to which y	you belong.	(b)				
9. (क) आपका धर्म		(क)				
(a) Your Religion.		(a)				
(ख) क्या आप अनुसूचित जाति/अनु	सचित जन–उ	नाति (ख)				
के हैं? "हां या नहीं" उत्तर दे 3		. ,				
हो. तो उस जाति का नाम लि		/				
(b) Are you a member of		iled				
Caste/Scheduled Tribe? A	nswer 'Yes	or				
No' and if the answer is	'Yes' state	the				
name thereof.					_	
10. साक्षाणक याग्यताः— 15 वर्ष की आयु से स्कूलों और काले	स्यों में किला ।	गान कार्च र	री अनुष्टि :	भीन कामन को न	шы. −	
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Name of School/College with full	laddress	Date of E		F. 79		Examination
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11. (क) यदि आपकी कभी नियुक्ति हुई प	उसका विवरण	दें:	ntering	F. 79		Examination
11. (क) यदि आपकी कभी नियुक्ति हुई र If you have, at any time, been o	उसका विवरण employed gi	दें:– ive details:	ntering	Date of Lea	iving	Examination Passed
11. (क) यदि आपकी कभी नियुक्ति हुई र If you have, at any time, been o पदनाम या कार्य का विवरण	उसका विवरण employed gi अव	दें:— ive details:	ntering	Date of Lea	iving	Examination Passed नौकरी छोड़ने के पूरे
11. (क) यदि आपकी कभी नियुक्ति हुई र If you have, at any time, been o पदनाम या कार्य का विवरण Designation of post held or	उसका विवरण employed gi अव Per	दें:— ive details: ाधि	ntering कार्यात संस्था	Date of Lea	lving	Examination Passed नौकरी छोड़ने के पूरे कारण
11. (क) यदि आपकी कभी नियुक्ति हुई र If you have, at any time, been o पदनाम या कार्य का विवरण	उसका विवरण employed gi अव	दें:— ive details:	कार्याट संस्था Full ac	Date of Lea	Iving पिछली Full r	Examination Passed नौकरी छोड़ने के पूरे
11. (क) यदि आपकी कभी नियुक्ति हुई र If you have, at any time, been o पदनाम या कार्य का विवरण Designation of post held or	उसका विवरण employed gi अव Per से	दें:— ive details: धि iod - तक	कार्याट संस्था Full ac	Date of Lea नय, फर्म या का पूरा पता ldress of the	Iving पिछली Full r	Examination Passed नौकरी छोड़ने के पूरे कारण reasons for leaving
11. (क) यदि आपकी कभी नियुक्ति हुई र If you have, at any time, been o पदनाम या कार्य का विवरण Designation of post held or	उसका विवरण employed gi अव Per से	दें:— ive details: धि iod - तक	कार्याट संस्था Full ac	Date of Lea or पूरा पता ldress of the ee, firm or	Iving पिछली Full r	Examination Passed नौकरी छोड़ने के पूरे कारण reasons for leaving
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11. (ख	यदि पिछली नौकरी भारत सरकार/राज्य सरकार/भारत सरकार	*
	द्वारा नियंत्रित योजना या राज्य सरकार/स्वायत्त	
	निकाय / विश्वविद्यालय / स्थानीय निकाय के अन्तर्गत गयी हो:	
(b)	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:	
	यदि आपने भारतीय रेल स्थापना संहिता के नियम 149 के अधीन या	.5
	केन्द्रीय सिविल सेवा (अस्थायी सेवा) नियम 5 या इसी प्रकार के अन्य	
	नियमों के अधीन आवश्यक अवधि का नोटिस दे कर नौकरी छोड़ी हो	
	तो क्या उस समय या बाद में अथवा आपकी नौकरी खत्म होने से	
	पहले आपके विरूद्ध कोई अनुशासनात्मक कार्रवाई की गयी या किसी	
	मामले में आपके आचरण का स्पष्टीकरण मांगा गया हैं?	
	If you had lift 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 subsequent date,	
	before your services actually terminated.	
12. (क)	क्या आपको कभी पकड़ा गया/गिरफ्तार किया/नजरबंद किया	
122 (47)	गया / मुचलका लिखाया गया / जुर्माना या किसी अपराध के लिए	
	न्या नुयलका लिखाया गया / जुमाना या किसी अपरोध के लिए	
	आयोग द्वारा उसकी परीक्षाओं / चयन में भाग लेने से वंचित किया	
	गया या आयोग्य ठहराया गया या किसी विश्वविद्यालय या किसी	
	शैक्षणिक प्राधिकारी/संस्था द्वारा निकाला गया/किसी परीक्षा में बैठने	
	से वंचित किया गया?	
(a)	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 and	
	Railway or Public Service Commission from appearing at	•
	its examinations/selections or debarred from taking any	
	examination/rusticated by any University or any other	
	educational authority/institution?	
2.(ख)	क्या यह साक्ष्यांकन फार्म भरते समय किसी न्यायालय में/या	
2 .(G)	विश्वविद्यालय या किसी अन्य शैक्षिणिक प्राधिकारी/संस्था में आपके	*,
(1)	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 up this attestation form?	
	at the time of ming up this attestation form.	
2.(ग)	यदि (क) और (ख) का उत्तर "हां" हो तो न्यायालय/विश्व	3 11
	विद्यालय / शैक्षिणिक प्राधिकारी आदि के पास चल रहे मुकदमों का	
	पूरा विवरण गिरफ्तारी, नजरबन्दी, जुर्माना दोष सिद्धि संजा आदि,	×
	लिखनी चाहिए।	<u>=</u> :
(c)	If the answer to (a) or (b) is 'Yes' full particulars of the	
, ,	case, arrest detention, fine, conviction, sentence etc. and	f
	Educational Authority etc. the time of filling up this form,	*
	should be given.	
	- इस साक्ष्यांकन फार्म के ऊपर लिखी गयी "चेतावनी" भी पढ़िये?	
Note .	Please also see the "Warning" at the top of this attactation form	

(5)	
1 0 1 1	
Names and addresses of two responsible persons of your locality or two references to whom you are known.	
में प्रमाणित करता हूँ कि पूर्ववर्ती सूचना मेरी जानकारी और वि भी परिस्थिति में अवगत नहीं हूँ जो मुझे सरकारी नौकरी से आयोग्य ठहर I certify that the foregoing information is correct and com am not aware of any circumstances which might impair my fitness to	plete to the best of my knowledge and belief. I
दिनांक / Date	
स्थान/Place	 उम्मीदवार का हस्ताक्षर
पहचान प्रेमाण-पत्र	
IDENTITY CERTIFIC	-
निम्नलिखित में से कोई भी पहचान प्रमाण-पत्र पर हस्ताक्षर कर सकते हैं :-	
Identity Certificate to be signed by any one of the following:-	-
(i) केन्द्रीय या राज्य सरकार के कोई भी राजित्रत अधिकारी। Gazetted Officers of Central or State Government.	
(ii) संसद या राज्य विधान सभा के सदस्य।	
Member of Parliament or State Legislative Assembly. (iii) उप मण्डल मजिस्ट्रेट/अधिकारी।	
Sub-Divisional Magistrates/Officers. (iv) तहसीलदार या नायब/उप—तहसीलदार जिन्हें मजिस्ट्रेट के अधि	
Tehsildars or Nayab/ Deputy Tehsildars Authorised to exer (v) सभी मान्य शैक्षिणिक संस्थाओं जिनमें प्राइमरी स्कूल भी शामिल Principals and Head-Masters of all recognised Institutions (vi) खण्ड विकास अधिकारी / Block Development Officer. (vii) डाकपाल / Post Master.	है, के आचार्य और मुख्य अध्यापक।
प्रमाणित करता हूँ कि मैं श्री / श्रीमती	V
पुत्र/पुत्रीको	वर्ष महीने से अच्छी तरह जानता हँ
तथा मेरी जानकारी तथा विश्वास के अनुसार उसके द्वारा दिये गये	
Certified that I have know Shri/Shrimati/Kumari	
Son/daughter of Shrimonths and that to the best of my knowledge and	years
correct.	The particulars forms and by moment are
स्थान / Place	2:
	•••••
दिनांक / Date	हस्ताक्षर
	Signature
	पदनाम या ओहदा और पता
	Designation or Status and Address
(कार्यालय द्वारा भरा जार (To be filled by the Off	·
(10 be filled by the Off	
1. नाम, पदनाम और पूरा पता	
Name, Designation and full address of . 2. प्राधिकारी, जो सत्यापन करता हो और	
The Authority which conducts the verification, and	
3. प्राधिकारी, जिसको जिला प्राधिकारियों द्वारा रिपोर्ट भेजी जाये। The Authority to whom the reports have to be sent by the District a	thorities.

पर विचार किया जा रहा हैं। Post or posts for which the candidates applied and for which he is being considered by the Railway Service Commission or other Selecting Authority.

4. पद, जिस या जिनके लिए उम्मीदवार ने आवेदन किया है और जिसके लिये रेल सेवा आयोग या अन्य चलन प्राप्तिकारी द्वारा उस

शपथ

मे श्री

पुत्र श्री

भारत के

संविधान को साक्षी मानकर यह सपथ लेता हूँ कि विधि द्वारा स्थापित भारत सरकार गणतंत्र के प्रति वफादार और पूर्ण निष्ठावान रहूँगा और मै अपने पद के प्रति कर्तव्यो का पालन वफ़ादारी और निष्पक्ष भाव से करूँगा |

> अभ्यर्थी के हस्ताक्षर नाम :-रोल न:-

MANDATE FORM

BY

VENDOR/CONTRACTOR/EMPLOYEE FOR DFT/ECS/RTGS/NEFT PAYMENTS

TELEPHONE NO & FAX NO: CELL PHONE: B-mail: PARTICULAS OF BANK ACCOUNT: BANK NAME: BRANCH NAME & ADDRESS: WACCOUNT NO: WACCOUNT NO: WACCOUNT NO: WI BANK'S MICR CODE WI BANK'S IFS CODE Therby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.	1.	NAME OF THE FIRM/PERSON/PARTY:
CELL PHONE: E-mail: P.A.N. NO.: PARTICULAS OF BANK ACCOUNT: BANK NAME: BRANCH NAME & ADDRESS: BANK BRANCH TELEPHONE NO: VI ACCOUNT NO: VI ACCOUNT NO: VI BANK'S MICR CODE VII BANK'S IFS CODE DECLARATION OF THE PARTY: I herby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.	2.	ADDRESS:
CELL PHONE: E-mail: P.A.N. NO.: PARTICULAS OF BANK ACCOUNT: BANK NAME: BRANCH NAME & ADDRESS: BANK BRANCH TELEPHONE NO: VI ACCOUNT NO: VI ACCOUNT NO: VI BANK'S MICR CODE VII BANK'S IFS CODE DECLARATION OF THE PARTY: I herby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		TELEPHONE NO & FAX NO:
3. P.A.N. NO.: 4. PARTICULAS OF BANK ACCOUNT: (i) BANK NAME: (ii) BRANCH NAME & ADDRESS: (iii) BANK BRANCH TELEPHONE NO: (iv) Account type(whether SB or Current): (v) ACCOUNT NO: (vi) BANK'S MICR CODE (vii) BANK'S IFS CODE 5. DECLARATION OF THE PARTY: I herby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		CELL PHONE: E-mail:
4. PARTICULAS OF BANK ACCOUNT: (i) BANK NAME: (ii) BRANCH NAME & ADDRESS: (iii) BANK BRANCH TELEPHONE NO: (iv) Account type(whether SB or Current): (v) ACCOUNT NO: (vi) BANK'S MICR CODE (vii) BANK'S IFS CODE 5. DECLARATION OF THE PARTY: I herby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.	3.	P.A.N. NO. :
(ii) BRANCH NAME & ADDRESS: (iii) BANK BRANCH TELEPHONE NO: (iv) Account type(whether SB or Current): (v) ACCOUNT NO: (vi) BANK'S MICR CODE (vii) BANK'S IFS CODE 5. DECLARATION OF THE PARTY: I herby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		
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(vi) BANK'S MICR CODE (vii) BANK'S IFS CODE 5. DECLARATION OF THE PARTY: I herby declare that the particulars given above are correct and complete. If the tis delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		(iv) Account type(whether SB or Current):
(vii) BANK'S IFS CODE [Viii] BANK'S IFS CODE [I herby declare that the particulars given above are correct and complete. If the tris delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		(v) ACCOUNT NO:
J herby declare that the particulars given above are correct and complete. If the to is delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		(vi) BANK'S MICR CODE
I herby declare that the particulars given above are correct and complete. If the to is delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.		(vii) BANK'S IFS CODE
is delayed or Not Affected at all for reasons of incomplete and incorrect information, the Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme to discharge the responsibility for which I am liable as a participate under the scheme.	5.	DECLARATION OF THE PARTY:
Date: Signature of the Supplier/Par		I herby declare that the particulars given above are correct and complete. If the transaction is delayed or Not Affected at all for reasons of incomplete and incorrect information, the User Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme and agree to discharge the responsibility for which I am liable as a participate under the scheme.
		Date: Signature of the Supplier/Party/Employee

N.B.: One cancelled Cheque/photocopy of the Cheque is to be enclosed. [Where the cheque does not carry IFS Code an attestation from Bank attesting the IFS Code should be given.]

SIGNATURE OF BANK OFFICIAL (Where required)

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Select your category [Please tick ((√)]						Cen	tra	l Go	over	nın	ent					L	S	Stat	te G	ove	ernn	nen	t					ł						ce				
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Tier-II					Tier II - Tax Saver (only for Central Government employees)											
As per the details given in Annexure IV				With same bank, nominee details Please write name of Pension Fund With different bank/nominee/investment details as per Annexure IV							ınd					
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INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

General guidelines

- (a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by the Nodal Office are liable to be rejected.
- Copies of documents submitted by the applicant should be self-attested.
- (c) Applicant is advised to retain the acknowledgement slip signed / stamped by the designated nodal officer where they submit the application.

SI	Item No	Item Details	Instructions
		Fathers Name, Mother's Name	(a) If the name has more than 30 digits, fill Annexure II for the same.(b) If the applicant is an Orphan, he/she may leave the fields blank, However, an official document to support the status to be submitted.
1	1	Politically Exposed Person	Politically Exposed Person's (PEPs) are individuals who are or have been entrusted with prominent public functions such as heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.
2	2	Proof of Idenity	If the applicant is submitting Aadhaar as proof of Identity, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
3	5	Bank Details	For Tier I & Tier II account, bank details and documentary proof are mandatory. Please submit a cancelled cheque / copy of bank passbook / bank statement / bank certificate / letter from Bank containing applicant's Name, Bank Name, Bank Account Number and IFS Code.
4	6	Nomination Details	 (a) If a subscriber has family at the time of making a nomination, the nomination shall be in favour of one or more persons belonging to his/her family. Any nomination made in favour of a person not belonging to family shall be invalid; A fresh nomination shall be made by the subscriber upon marriage and any nomination made before such marriage shall deemed to be invalid; If at the time of making a nomination the subscriber has no family, the nomination may be in favour of any person or persons but if the subscriber subsequently acquires a family, such nomination shall forthwith be deemed to be invalid and the subscriber shall make a fresh nomination in favour of one or more persons belonging to his family. (b) In case of more than one nominee, the percentage share for each nominee should be in whole numbers and must be equal to 100, (c) Please refer nomination relationship matrix provided below.
5	7	Selection of Pension Fund (PF) & Investment Choice	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' or in Life Cycle Funds - LC 50 / LC 25 under 'Auto Choice', The choices exercised by applicants from State Government/Autonomous body shall be ignored if the choice is not extended by the respective employer and the contributions shall be invested as per the default choice, If no choice is provided, the contributions will be distributed among the three default Pension Funds (SBI/UTI/LIC) selected by the Government.
6	9	FATCA & CRS Declaration	Ciarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India: - Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA. - Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number). - In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided. - In case applicant is declaring US person status as 'Yes', provide PAN and 'father name' in addition to details required under section 9 of form,
7	9 & 10	Declaration / Signature by Applicant	In case the applicant is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the designated nodal officer attesting the same under his/her official seal and stamp.

Marital Status	Male	Female	Transgender
Unmarried	Mother Father Please specify the relationship if any other person	Mother Father Please specify the relationship if any other person	Mother Father Please specify the relationship if any other person
Married	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Daughter in Law 7. Grandson 8. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter
Widow/ Widower	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grendson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter
Divorcee	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and respective Point of Presence (PoP).
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated respective nodal office where they submit the application.
- c) For more information / clarifications, contact CRA:

Website: https://www.npscra.nsdl.co.in Call: 022-4090 4242

Address: Central Recordkeeping Agency (CRA)
Protean eGov Technologies Limited
(formerly NSDL e-Governance Infrastructure Limited)

1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai - 400013

Annexure	s - Subscriber Reg	istration Form for Go	vernment Sect	or applicants (Tick and fill a	applicable annexures belo	ow)
Annexure I - Print I	PRAN Card in Hind	If (Fill the details in Dev	magri script)			
Applicant's First Name						
Middle Name	or other I workers					
Last Name	15 of					
Father / Mother's First N	lame					
Middle Name						
Last Name						
Annexure II - If alpi	habets of name ex	ceeded the space pro	vided on page	1 of the application form		
Applicant's First Name Middle Name						
Last Name						
Father's First Name						
Middle Name						
Last Name		Land Lands and a suit				
Mother's First Name						
Middle Name						
Last Name						++++
	anal Namination	For Tion 1	For Tic	Ear Tion II To	(Sayor	
Annexure III - Additi		For Tier - I	For Tie			14. 40001
Percentage Share	Nominee I	Nominee I		Nominee III	Total should be equa	I to 100%
Nominee I - Name	F		MILE	d 1 e 1 b	L a s f	
Nominee I - Name Relationship Name of Guardian		A	ge	Date of Birth (in case of Min	or) 0 0 / M M	YYYY
Name of Guardian	FITST		MINIS	8.44	i, a s 1	
(ii nominee is a minor)			2/2/2/2			
Nominee II - Name	Flile(slt)		M III (d)	0 1 e \$ -	L a s i	
Nominee II - Name Relationship Name of Guardian			ge Ehlab	Date of Birth (in case of Min	or) D D / M M	AAAA
Name of Guardian (if nominee is a minor)	Fjrst		WEST G	v 1/6 1 5 2 5 1	Last	
(ir nottlinge is a minor)					of FREE Landon Scotter Vision State (STA)	white most contact with an interesting contact the most resource.
Nominee III - Name Relationship Name of Guardian (If pominee is a minor)	FUFFIF			4/116	1 0 5 1	
Relationship		A		Date of Birth (in case of Min	and the second second	Tax X X X
Name of Guardian	F r s t		Marine d	di filmani	1 8 3 1	
Annexure IV - tick	and fill as applicable	Activate Tier	Acti	vate Tier - II Tax Saver# (av	allable to Central Govt en	npioyees only)
PAN*			12.5			and an area of a
No change in Bank	details	Bank details for Tier	-II are as unde			
Account Type	Saving A/c	Current A/c				
Bank A/c Number						
Bank Name				IFS Code		
No change in Nom	inee details	Nominee details for	Tier-II are as u	nder:		
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Nomînee Name	r s 1		M i did 1	8	Last	
Relationship		Age	D	ate of Birth (in case of Minor) [D]D]/MM/	YYYY
Name of Guardian	1 7 2 1		M I d d	1 4	Last	
(if nominee is a minor)						
In case you desire to nomina	te more than one perso	on, fill Annexure III above				
Investments detail	s for Tier-II are as	under:			*only selection	of PF is required
	Pension Fund* (Plea	ise Tick (√) one)		Investmen	t Choice (Please Tick (√) one	9)
Aditya Birla Sunlife Pe	ension Mgmt Ltd	Axis Pension Fund Mana	agement Limited		mention the % share in applicat	1
HDFC Pension Mgmt	Co Ltd	ICICI Prudential Pension F		E (upto 100%) C (Upto % Equity % Corp		Total 100%
Kotak Mahindra Pensi	li de	LIC Pension Fund Limite		76 Equity 76 COPP	OR GOVE Sec	100%
Max Life Pension Fun	_	SBI Pension Funds Priva		Auto Choice	Select one life cycle fund below	
TATA Pension Mgmt L	,tu	UTI Retirement Solution	a cuinten	Conservative (LC25) Me	oderate (LC50) Aggres	ssive (LC75)
Nome of the A - P						
Name of the Applicant Place		Adversaria (a) executado (b. de jorne) se tipo de se tipo (b. de jorne) trado (a) especiales (b. de las jornes de jo	of the party of the control of the c	man contribution and produce plant growth and produce		
Date	n.o.	W/ M/ Y/ Y/ Y/ Y		Si	gnature / Thumb Impression*	of Applicant
Date	1.3 / 1.3/ 1/	VO TENT TO TAKE T			(refer instructions)	