

No.6/1/2021-CS-II(C)
Government of India
Ministry of Personnel, Public Grievances & Pensions
(Department of Personnel and Training)

3rd Floor, Lok Nayak Bhavan
Khan Market, New Delhi
Dated 15.03.2021

To,

The candidates as in Annexure

Subject: **Non submission of willingness and attestation form -
Stenographers Grade 'C' & 'D' Examination, 2018.**

Sir /Madam,

I am directed to refer to this Department's OM of even number dated 11.02.2021 which is available on the website of this Department at dopt.gov.in → About us → Central Secretariat → CSSS → Recruitment → Steno Grade D and to say that the candidates, as mentioned in the annexure, have not yet submitted their willingness and attestation form.

2. All these successful candidates of Stenographers' Grade 'C' & 'D' Examination, 2018 recommended for the grade of Stenographer Grade 'D' of CSSS are required to submit the following documents immediately:

- (i) **Willingness to join the post**
- (ii) **Four sets of Attestation Form, all sets duly filled in ink.**

[The candidates may take print out (back to back) of the Attestation Form attached (**Annexure-II**) and should carefully fill in the forms. No point in the form shall be left blank. The photograph pasted on all four sets should be self attested by the candidate. Specific answers to each of the questions in point 15 of the form should be given by **striking out** 'yes' or 'No' as the case may be and **not** by tick mark ✓. The Candidates should fill in the point 10 also even if it is same as in the points 2 or 3 of the form]

3. The candidate who in the point number 10 of the attestation form indicates his/her having resided in Delhi should additionally send duly filled-in **Annexure-III** along with self-attested copies of the following documents and the soft copies of the same by email at **bhagirathjha.68@gov.in / ranjan.ak13@nic.in**

- (a) One passport Size photograph in JPEG format (less than 20 kb)
- (b) One copy of photo identity proof in JPEG format (less than 200 kb)
(any one of the following)

- (i) PAN card
- (iii) Election ID

- (ii) Driving License
- (iv) Aadhar Card

(c) One copy of residential proof in JPEG format (less than 200 kb)
(any one of the following)

- | | |
|---------------------------------|-----------------------|
| (i) Passport | (ii) Electricity Bill |
| (iii) Telephone Bill (landline) | (iv) Ration Card |
| (v) Passbook | (vi) Utility Bill |
| (vii) Rent Agreement | (viii) Others |

4. Candidates as mentioned in annexure should ensure that the requisite documents reach the undersigned at the address mentioned hereunder, latest by **25th March, 2021 failing which their candidature shall be processed for cancellation without any further notice.**

“Department of Personnel & Training, CS-II Division
(Shri Bhagirath Jha, Under Secretary)
3rd Floor, Lok Nayak Bhawan,
Khan Market, New Delhi – 110003”

5. For further information/direction, if any, these candidates are required to follow the website of Department of Personnel & Training (www.dopt.gov.in) regularly.

Yours faithfully



(Bhagirath Jha)

Under Secretary to the Government of India

Tele: 24654020

e-mail: bhagirathjha.68@gov.in

ANNEXURE-I

S.No.	Roll No.	Name	Cat	Rank
1	2201049061	SOMYA SATIJA	UR	29
2	3010602657	KAJAL GUPTA	UR	87
3	6005002861	DISHANK GUPTA	UR	142
4	2201043934	VAISHALI PRUTHI	UR	159
5	3206004867	KUMAR ABHISHEK RANJAN	OBC	188
6	2201050805	MANUJA RAWAT	UR	224
7	2201028616	ANISHA SAHU	UR	230
8	2201055350	SHAZAAD ZAKIR	OBC	237
9	2201065687	CHETAK	UR	251
10	2405015790	GANESH KUMAR SHARMA	UR	255
11	2201028671	SHANAJ BEGUM	UR	257
12	2201055043	PRASHAN	SC	295
13	2201066227	VANDANA SINGH	OBC	570
14	3013600458	DINESH KUMAR MURMU	ST	903
15	3206610962	HARI SHANKAR KUMAR	OBC	988

To

The Under Secretary (CS-II)
CS-II Division
Department of Personnel & Training
3rd Floor, Lok Nayak Bhawan
Khan Market, New Delhi-110003

Subject:- Appointment to the grade of **Stenographer Grade 'D' of CSSS**- Submission of documents by candidates of **Stenographers Grade 'C' & 'D' Examination, 2018**, conducted by SSC-reg.

Sir,

I am refer to letter No. 6/1/2021-CS-II(C) dated 11th February, 2021 of Department of Personnel & Training on the subject mentioned above and hereby convey my willingness to join the grade of Stenographers Grade 'D' of Central Secretariat Stenographers' Service.

2. Three sets of Attestation Forms duly filled in my own handwriting, are also attached.

3. My details (in brief) are as under:

- | | | | |
|------|--|---|-------|
| i. | Roll No. | : | _____ |
| ii. | Date of Birth | : | _____ |
| iii. | Email | : | _____ |
| iv. | Mobile No. | : | _____ |
| v. | Previous Employer (if any)
(Name of Organization) | : | _____ |
| vi | Full Address of previous
employment | : | _____ |

Yours faithfully

Signature:

Name.....

Rank (AIR).....

Date:

ATTESTATION FORM

<p align="center">Affix signed passport size (5 cm. X 7 cms. approx.) copy of recent photograph</p>	<p align="center">"WARNING"</p> <ol style="list-style-type: none"> 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. 2. If detained, convicted, debarred etc. subsequent to the completion and submission of the form, the details should be communicated immediately to CS.II Divison, DoP&T, failing which it will be deemed to be a suppression of factual/material information. 3. If, the fact that false information has been furnished or that there has been suppression of any factual/material 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" in accordance with the extant rules.
<p>1. (a) Name in full (in block capitals) with aliases, if any,</p> <p>(b) Have you ever added or dropped in any stage any part of your name or surname: Yes/No</p> <p>(If Yes, provide details)</p>	
<p>2. Present address in full (i.e., Village, Thana, District, State and Pincode</p> <p align="center">or</p> <p>House No., Lane/Street/Road & Locality, City, State and Pincode)</p>	
<p>3. (a) Permanent address in full (i.e., Village, Thana, District, State and Pincode</p> <p align="center">or</p> <p>House No., Lane/Street/Road & Locality, City, State and Pincode)</p> <p>(b) If originally a resident of Pakistan/Bangladesh (erstwhile East Pakistan) the address in that country and the date of migration to Indian Union.</p>	
<p>4. Aadhar Card No.</p>	
<p>5. Permanent Account Number (PAN)</p>	
<p>6. Nationality</p>	

Signature

7. (a)	Date of Birth (DD/MM/YYYY)	
(b)	Present Age (at the time of filling the form)	____ Years ____ Months ____ Days
(c)	Age at the time of passing Matriculation	
8. (a)	Place of birth, district and state in which situated	
(b)	District and state to which you belong	
(c)	District and state to which your father originally belongs	
9. (a)	Religion	
(b)	Whether belonging to Scheduled Caste / Scheduled Tribe/Other Backward Class (Creamy Layer) / Other Backward Class (Non- Creamy Layer)/ Economically Weaker Section (EWS)?	

10. Particulars of places (with duration) where you have resided during the preceding five years (from the date of filling of this form).

[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)]

From (Month, Year)	To (Month, Year)	Address in Full (i.e Village, Thana, District, State, Pincode or House No., Lane/Street/Road and Locality, City, State, Country and Pincode)	Name of District Head Quarter of the place mentioned in the preceding column.

Signature

11.	Name (in full & aliases if any)	Nationality (by birth &/or by domicile)	Place of Birth	Occupation if employed - Give designation and Official Address	Present Address (If dead, give last address)	Postal Address	Permanent Home Address
(a) Father							
(b) Mother							
(c) Spouse							
(d) Brother(s)							
(e) Sister (s)							

12.	Information to be furnished with regard to son(s) and/or daughter(s) in case they are studying/living in a foreign country.					
Name	Nationality (by birth &/or by domicile)	Place of Birth	Country in which studying/living with full address	Date from which studying/living in the country mentioned in the previous column		

13.	Educational Qualification showing places of education with years in Schools and Colleges since 15 th year of age.					
Name of School/College (with full address)			Date of Entering	Date of Leaving	Examination Passed	

Signature

14. (a) Are you holding or have any time held any 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, up-to-date.

Period		Designation, Emoluments and Nature of Employment	Full name and address of employer	Reasons for leaving previous service
From	To			

14. (b) If the previous employment was under the Govt. of India, a State Govt. / an undertaking owned or controlled by the Govt. of India or a State Govt. / an autonomous body / University / Local body.

If you had left service on giving a month's notice under 5 of the central civil services (temporary service) rules, 1965, or any similar corresponding rules were any disciplinary proceedings initiated 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 were actually terminated?

15. (i)			Answer in 'Yes' or 'No'
	(a)	Have you ever been kept under detention?	
	(b)	Have you ever been arrested?	
	(c)	Have you ever been prosecuted?	
	(d)	Is any criminal case pending against you in any Court of Law at the time of filling up this Attestation form and charge-sheet in that case has been filed or not?	
	(e)	Have you ever been convicted by a court of law for any offence?	
	(f)	Whether discharged/expelled/withdrawn from any training/institution under the Government or otherwise?	
	(g)	Have you ever been rusticated by any university or any other educational authority / institution?	
	(h)	Have you ever been debarred / disqualified by any Public service commission from appearing at its examination / selection?	

Signature

(ii)	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 attestation form:
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Note: (i) Please also see the 'WARNING' at the top of this Attestation Form.
(ii) Specific answers to each of the questions should be given by writing 'Yes' or 'No' as the case may be.

16.	Name, Address and Aadhar No. of two responsible persons of your locality or two references to whom you are known:	1) 2)
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DECLARATION

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

I am fully aware that by providing false information or suppressing material information while filling this form, the authorities have full right to terminate my appointment and I am also liable for appropriate criminal/civil/legal action as a consequence.

I am not aware of any circumstances which might impair my fitness for employment under Government.

Date:

Place:

Signature of Candidate

TO BE FILLED BY THE OFFICE

(i) Name, Designation and full address of the authority forwarding the form:

Under Secretary to the Government of India
CS.II Division
Department of Personnel & Training,
3rd Floor, Lok Nayak Bhavan,
New Delhi-110003

(ii) Post for which the candidate is being considered:

Stenographer Grade 'D', 'Group-C', Non-Gazetted of Central Secretariat Stenographers' Service.

FORM OF MEDICAL CERTIFICATE

I hereby certify that I have examined Sh/Smt/Km. _____
a candidate for employment in the Central Secretariat Service in the Government of
India and cannot 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 Central Secretariat Service
in the Government of India.

The age of Shri/Smt./Kum. _____ according to
his/her own statement is _____ years, and by appearance is about _____ years.

(Signature/thumb impression
of the candidate)

Date _____

(To be signed in the presence of
the examining Medical Officer)

(Paste a photograph
of the candidate
examined)

Signature of Medical Officer

Name _____

Address _____

Official Seal

(Seal should be spread over
form and the photograph)

Note: The officer making this certificate should be a Civil Surgeon or a
District Medical Officer of equivalent status of a Government Hospital

CANDIDATE'S STATEMENT AND DECLARATION

(The candidate must make the following statement and must sign the declaration below it before the medical officer. Attention is specially invited to the **WARNING** in the 'Note' at the bottom of page 2.)

1. Name in full
(in BLOCK letters) _____
2. Age and place of birth _____
3. Have you ever had
(a) small-pox, intermittent fever and
other fever, enlargement suppuration
of glands, spitting of blood, fainting
attacks, rheumatism or appendicitis? _____
OR
(b) any other disease or accident
requiring confinement to bed and
medical or surgical treatment? _____
4. When were you last vaccinated? _____
5. Have you or any of your relatives been
afflicted by consumption, scrofula, gout,
asthma, fits, epilepsy or insanity? _____
6. Have you suffered from any form of
nervousness due to overwork or any
other cause? _____
7. Have you been examined and declared fit
for Govt. Service by a medical officer/
Medical Board within the last three
years? _____

8. Furnish the following particulars:

Father's age, if living, & state of health	Father's age at the time of death and cause of death	No. of brothers living, their ages and state of health	No. of brothers who have died, their ages at death and cause of death

Contd...../-

Mother's age, if living, & state of health	Mother's age at the time of death and cause of death	No. of sisters living, their ages and state of health	No. of sisters who have died, their ages at death and cause of death

DECLARATION

I declare that all the above answers are true and correct to the best of my knowledge and belief. I also solemnly affirm that I have not received any disability certificate/ pension on account of any disease or other condition.

Date: _____

Candidate's signature

Signed in my presence.

Signature of Medical Officer

Name: _____
& Designation: _____

Note: The candidate will be held responsible for the accuracy of the above statement. By wilfully suppressing any information he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to superannuation allowance or gratuity.

(Please take back to back print)

Annexure-III**Candidate's Details for Delhi Police Verification**

1	Name of the Candidate		
(a)	Alias name, if any		
2	Father's Name		
3	Mother's Name		
4	Marital Status		
(a)	If married, name of the spouse		
5	Blood Group		
6	Place of Birth		
7	Candidate's Date of Birth		
8	Gender		
9	Candidate's Contact No.		
10	Candidate's email id		
11	Nationality		
12	Religion		
13	Category		
14	Present Address		
15	Permanent Address		
16	Address Duration (Delhi)	From (Month & Year)	To (Month & Year)
17	Add more than one address (Delhi) here-	From (Month & Year)	To (Month & Year)
18	Police Station		
19	District		

Signature with Date

Rank No./Year of Exam.