

**TELANGANA GRAMEENA BANK
HEAD OFFICE: HYDERABAD**

Personnel Dept.
Date: 30.10.2015

The 2nd list of provisionally selected candidates for the post of Office Assistant (Multi Purpose) appeared for written test in Sep/Oct 2014 and interviews conducted from 25.05.2015 to 03.06.2015 & 03.08.2015 to 07.08.2015 is displayed in our website from 30.10.2015.

Female candidates while undergoing medical tests, if Pregnancy is detected; they are to be found TEMPORARILY UNFIT by the Civil Surgeon. Such candidates will be considered for Appointment after delivery and on production of a 'Fitness certificate' from the Civil Surgeon. The posts will be kept as vacant and unfilled till such time. (To avail this facility, the pregnant candidates have to give a request letter in writing along with the Medical certificate from the Surgeon and obtain permission from the Competent Authority).

The provisionally selected candidates are advised to report at the following address on the dates mentioned in the list along with the Original Certificates, Documents, etc., and a set of attested xerox copies mentioned in the model Provisional Selection letter which is displayed below.

**TELANGANA GRAMEENA BANK
HEAD OFFICE
H.NO. 2-1-520, II FLOOR
VIJAYASRI SAI CELESTIA
STREET NO.09, NALLAKUNTA
SHANKERMUTT ROAD
HYDERABAD-500 044**

The proforma of the following are also displayed.

1. Bio data
2. Antecedents/ Character Certificate
3. Medical Certificate.
4. Form11 of PF Organisation
5. Declaration to be submitted by the OBC candidates.

Note: No individual Provisional selection letters will be sent to the candidates separately.

In case of any clarifications, please contact 040-27600849/ 9491041986/ 9491041997. (from 10.30 A.M. to 5.30 P.M)

**Sd/-
GENERAL MANAGER (ADMN & IT)**

TELANGANA GRAMEENA BANK
HEAD OFFICE:HYDERABAD

Date: 30.10.2015

**2ND LIST OF PROVISIONALLY SELECTED CANDIDATES FOR THE POST OF OFFICE ASSISTANT
(MULTI PURPOSE) WHO APPEARED FOR WRITTEN TEST HELD IN SEPTEMBER /OCTOBER,
2014 AND INTERVIEWS HELD FROM 25.05.2015 to 03.06.2015 & 03.08.2015 to
07.08.2015**

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE	CATEGORY OF THE CANDIDATE
1	09.11.2015 (Monday) 10:00 A.M.	1121300862	SRINIVASA RAO BITRA	OBC EXS
2		1121500662	MANGISETTY VENKATA CHAKRAVARTHY	GEN. EXS
3		1140103745	BHAGYA REKHA PAMULA	SC
4		1140104628	PIDATALA NEELIMA	SC
5		1140105168	VINOD KUMAR BANKA	SC
6		1140505633	THEMIDIDAPATI GOPI	OBC
7		1141503653	SRINIVASA RAO MALLELA	GEN. EXS
8		1150502951	AVINASH BANDI	OBC
9		1150709647	SURYA PRAKASH DWIBHASHYAM	GEN.
10		1151304955	SRINIVAS NAREDLA	OBC EXS
11		1160100940	KURMA NIRANJAN	SC
12		1160701297	S M BAPIRAJA KUMAR BADAM	GEN.
13		1170103878	OBULESU Y	SC
14		1180700459	GAJULA DIVYA	GEN.
15		1180701625	GOWTHAMI SOMA	GEN.
16		1180702002	SYED ZAREENA BEGUM	GEN.
17		1180702150	KRUPAKAR PERUMALLA	GEN.
18		1190101246	KAMATHAM R PRAVALLIKA	SC
19		1190704730	KASA AVINASH	GEN.
20		1200101358	BODDU SIVAKUMAR	SC
21		1200700493	RAMESH BABU KONDA	GEN.
22		1240102240	K REDDY PRASANNA	SC
23		1240500692	MUNI KUMARI ANUSHA PAINAGARI	OBC

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE	CATEGORY OF THE CANDIDATE
24	09.11.2015 (Monday) 10:00 A.M.	1240702683	NAGENDRA REDDY A	GEN.
25		1250600001	D J LAKSHMANA KUMAR GANNU	OBC OC
26		1250702011	YALAMANCHILI SUDHA KRISHNA	GEN.
27		1250707492	SHAIK JOHNY BEGUM	GEN.
28		1250710149	KRANTHI KUSUMA BADISA	GEN.
29		1260501775	VAJJA PRIYANKA	OBC
30		1260503531	E V SAGAR EDUBILLI	OBC
31		1260503671	GOTTAPU SUDHAKARA RAO	OBC
32		1260700510	SANKA SWATHI	GEN.
33		1270500424	MANTHI KUSUMA	OBC
34		1270700350	DURGAPRASAD NARAYANARAO JILLUDIMUDI	GEN.
35		2810100117	MYADARI VIJAYA	SC
36		2810300538	DHEERAVATH KAVITHA BAI	ST
37		2810304388	KUNTAMUKKALA SWATHI	ST
38		2810500559	ARUNA R	OBC
39		2810506486	ABHINAV GARLAPATI	OBC
40		2810507123	MATAM RAVI KUMAR	OBC
41		2810515665	NARSING ANUSHA	OBC
42		2810517638	RANJITHKUMAR SAMALA	OBC
43		2810521450	B KAMALAKAR	OBC
44		2810701463	MARLAPALLI DIVYA	GEN.
45		2810701579	SWATHI VEMPATI	GEN.
46		2810703882	G SHEKAR REDDY	GEN.
47		2810703898	SANTHOSH KUMAR M V	GEN.
48		2810705267	CHAITANYA BHARATHI MALISH	GEN.
49		2810709063	DIVYA DONAPATI	GEN.
50		2810715974	SHIREESHA SHER	GEN.
51		2810718343	A ARAVINDU	GEN.
52		2810722542	G SHASHIKANTH REDDY	GEN.

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE	CATEGORY OF THE CANDIDATE
53	09.11.2015 (Monday) 10:00 A.M.	2810726370	P SAI CHARAN	GEN.
54		2811303916	MOGULA SHANKAR GOUD	OBC EXS
55		2811307833	P PRASHANTH	OBC EXS
56		2811503930	KORELLA PRAVEEN KUMAR	GEN. EXS
57		2811503936	PRAVEEN KUMAR ARANI	GEN. EXS
58		2811507853	AMBAREESHA KRISHNA PRASAD	GEN. EXS
59		2811514748	K CHINNA HANUMANTHA REDDI	GEN. EXS
60		2820103559	BOGE RAJASEKHAR	SC
61		2820502066	BILLA SHRUTHI	OBC
62		2820701600	PILAKA VENKATA DIVYA REDDY	GEN.
63		2820703221	ANIL KUMAR UPPUGANTI	GEN.
64		2830702442	SHAIK ZAHEEDA	GEN.
65		2840700663	KARTHEEK KONDLE	GEN.

Date: 30.10.2015

Sd/-
GENERAL MANAGER (ADMN & IT)



TELANGANA GRAMEENA BANK

(Sponsored by State Bank of Hyderabad)

Head Office, # 2-1-520, 2nd Floor, Vijayasri Sai Celestia, Street No.9
Shankermutt Road, Nallakunta, Hyderabad, Telangana. -500 044.

Website : www.tgbhyd.in

Phone : 040-27600849

E-mail : cmper@tgbhyd.in

FAX : 040-27662623

Lr.No.Gr-I/2015-16/

Date: 30.10.2015

Name & Roll No.:

Dear Sir / Madam,

MODEL PROVISIONAL SELECTION LETTER

We are pleased to inform that you have been provisionally selected for appointment for the post of **Office Assistant (Multi Purpose)** in our Bank, based on the written test and interview held by the Bank.

1. Please note that **your appointment is subject to production of following original certificates at the time of your reporting on the date indicated herein:**

- Educational qualifications, experience, etc., certificates mentioned in your application, starting from 10th class.
- Proper relieving certificate, no objection certificate from your present employer (in case you are presently employed).
- Character and antecedents certificate from (2) respectable persons, not related to you and Bio-data (four sets) duly filled, Form-11 and Declaration (in case of OBC candidates only).
- Conversion certificate issued by the competent authority and a copy of the gazette notification for the change in your name, if any.
- Relevant Caste certificate in original in the prescribed format issued by the competent authority in proof/ support of the claim for the category under which you have been provisionally selected.
- Latest nativity/ Residential Certificate issued by the Competent Revenue Authority.
- Further, submission of certificates/letters, etc., if any, not produced at the time of interview.

2. You are advised to bring Medical Fitness Certificate, as per proforma, obtained from not below the rank of Assistant Civil Surgeon in Govt. Hospital (or)

Our panel doctor whose address is given below. The fees for this certificate is to be paid by the candidates to the hospital directly.

Dr.K.V.R.Prasad

Sri Devi Nursing Home, Varasiguda

Secunderabad. Phone No.s 040-27509124, 040-27510213.

3. Please note that you are provisionally selected for appointment in the bank as an **Officer Assistant (Multi Purpose)** relying on the particulars furnished by you in your application and other certificates / testimonials submitted. In case it is found that any of the particulars / certificates / testimonials furnished by you are found / proved to be false or incorrect at a later date, your provisional selection will be cancelled or if you are appointed by the Bank, you will be summarily dismissed **from the service and liable for any other action deemed fit by the Bank.**

You are advised to report to the undersigned on the date and time mentioned in the list along with original certificates / testimonials as mentioned above and a set of attested xerox copies, at our Head Office.

Yours faithfully,

Sd/-

GENERAL MANAGER (ADMN & IT)

BIO-DATA FORM

- 1. Name :
- 2. S/O/ D/O /W/O :
- 3. Date of Birth & age as on 01.07.2014 :
- 4. Educational Qualification :
- 5. Other Qualifications, if any :

Affix passport size
Photograph
with signature
of candidate

- 6. Permanent Address :
- 7. Occupation of parents :

- 1) Father : Annual Income :
- 2) Mother : Annual Income :

- 8. Place of domicile :
- 9. Name of Spouse : Annual Income:
- 10. No. of Dependants :

Sl No.	Name	Relation	Age
1			
2			
3			
4			
5			
6			
7			
8			

- 11. Category of caste :
- 12. Whether married :
- 13. No. of children :

- 1) Name _____ Age _____
- 2) Name _____ Age _____

14. Status of present Employer if any, (Govt./Semi.Govt./Public/Pvt. Sector):

- 15. Languages Known : Speak Read Write
- 1)
- 2)
- 3)

16. Identification marks:

1)

2)

17. Character certificates as per the proforma, duly furnishing Name, occupation and addresses of two respectable persons, not related to you, who issued certificates.

1)

2)

18. Particulars of cases pending against you in any court of law including case (s) for non- payment of any loan from Banks/Financial Institution :

19. Particulars of disqualification / debarment by any Service Commission, examining body at their selection / examination :

20. Particulars of any case (s) of disciplinary action instituted /pending against you by your present or previous employer (s). Please also state whether you were debarred from appearing in any promotion examination.

21. Medical Report Date _____ :
(To be furnished after medical examination)

22. Have you ever been arrested, prosecuted, kept under detention or bound down /fined, convicted under the of law for offences involving moral turpitude. If yes details:

23. Is any case pending against you in any court of law or involving moral turpitude. If yes give full details:

Place:

Date:

Signature

Name:

Roll. No.

A N N E X U R E
(CHARACTER CERTIFICATE)

1. Name of the candidate : _____
2. Applied for the post of : _____
3. Is the candidate known to you : Yes / No
4. If so, kindly state the period : _____ Year _____ months
5. Whether to the best of your knowledge and information
 - a. The candidate has at any time taken active part in politics
 - b. He was ever arrested / prosecuted / kept under retention or convicted by court of law.
6. Is the family of the candidate is known to you.
7. Has any member of the candidate's family ever been arrested / kept / kept under detention or convicted by a court of law.
8. Are you aware of any circumstances which would render the candidate unsuitable for appointment in a banking institution ?
9. Is the candidate related to you :

I certify that the above information is correct to the best of my knowledge and belief and that Sri / Smt. / Kum. _____ S/o. _____ R/o. _____ bears a good moral character.

Place :	Signature:
Date :	NAME :
	Status :
	Mobile No. :
	Postal Address:

TELANGANA GRAMEENA BANK
MEDICAL EXAMINATION REPORT

PART - I: PERSONAL STATEMENT OF THE CANDIDATE

To be filled in by the candidate before presenting the form to the Medical Officer.

1. Name in full (Surname First) :
2. Category of Post :
3. Address : _____
: _____
: _____
4. Date of Birth :

--	--

 DD

--	--

 MM

--	--	--	--

 YYYY
5. Married/Single/Widow/Widower :
6. Personal History :
- a) Whether any time you have vomited blood or coffee colour or had bleeding from anus with stools or suffered with pain in Abdomen if so. What was the diagnosis of your doctor or suffered with prolong fever or jaundice etc. Give details if yes. : Yes/No
- b) Any history of cough with expectoration blood in sputum, breathlessness or chest pain with cough. Give details if yes. : Yes/No
- c) Any history of feeling heart beats chest pain associated with sweating, spell of fainting, breathlessness at rest or chest discomfort discoloration of lips or nails on exercise, joint pains, swelling of legs or breathlessness disturbing your sleep. : Yes/No
- d) Any history of passing blood or stones in the urine or burning during and after passing urine or difficulty in passing urine or any discharge after passing urine. : Yes/No
- e) Any history of fits (convulsions) or Paralysis of any part of the body (i.e. any limb or face) or deviation of mouth. : Yes/No
- f) Any history of allergy of skin or loss of sensation of any part of body or sense of hot and cold. Do you any time suffered with leprosy or discharge after urination. Ulcers or growths on private parts. Do you have more than one sex partners regular or occasional. : Yes/No
- g) Have you suffered from defects in hearing or eye sight. Give details : Yes/No

Contd.....2

:: 2 ::

- h) Details of serious illness/injuries sustained by accident or otherwise. Give details : Yes/No
- i) Details of surgical operation undergone. : Yes/No
- j) Is there any other item in your medical history which you have not already mentioned? : Yes/No

7. FAMILY HISTORY:

- i) Heart disease and blood pressure. If yes relationship. : Yes/No
- ii) Chronic Cough with expectoration with weight loss (Tuberculosis). If yes relationship : Yes/No
- iii) Kidney disease. If yes relationship : Yes/No
- iv) Cancer. If yes relationship : Yes/No
- v) Any other serious ailments. If yes relationship : Yes/No
- vi) Diabetes. If yes relationship : Yes/No

8) FOR FEMALE CANDIDATES ONLY

- i) Menstrual History (Monthly Periods) : Regular / Irregular
- ii) First date of last menstrual period :
- iii) Any evidence of Pregnancy : Yes / No

I hereby declare that the above statements are correct to the best of my knowledge and that any incorrect/suppressed information will render me liable for termination of my services in the Bank.

Place :

Date :

(
SIGNATURE OF THE CANDIDATE

SIGNED IN MY PRESENCE

SIGNATURE OF THE MEDICAL EXAMINER

NOTE:

The candidate may please note that they would have no right to appeal against the decision of the Medical Examiner. If, however the Bank is satisfied on the basis of the evidence produced before it, of the possibility of an error of judgment in the decision of the Medical examiner, it is open to the Bank to allow an appeal to a Medical board which will be constituted by the Bank. Such evidence should however, be submitted by the candidate within one month of the date of communication in which the decision of the Medical Examiner is advised to him/her. If the setting up of the Medical Board is decided by the Bank the candidate will be called upon to deposit the expenses of medical board. If found medically fit by the board this deposit would be refunded to the candidate. It will otherwise be forfeited. The report of the Medical Board is final and will not be subject to review by any other special list Panel or Board.

TELANGANA GRAMEENA BANK
MEDICAL EXAMINATION REPORT

Affix recent
passport size
photograph
duly attested
by Medical
Examiner

PART - II REPORT OF THE MEDICAL EXAMINER

Name of the Candidate :

Category of the Post :

1. General Development : Good _____ Fair _____ Poor _____

a) Nutrition : Thin _____ Average _____ Obese _____

b) Best weight _____ Kg. When DD MM YYYY Height _____ Cms.

c) Any recent change in weight : _____ Kgs. Weight: _____ Kgs.

d) Temperature : Normal/Raised

e) Girth of chest :

i) After full inspiration : _____ Cms

ii) After full expiration : _____ Cms

f) Identification Marks : ABM/Scar

: ABM/Scar

2. Skin : Any obvious disease : Yes/No

3. Ears : Inspection : Clear /Blocked

Hearing : Right Ear : Normal/Defective

Left Ear : Normal/Defective

4. Glands Normal/Enlarged : Thyroid Normal/Enlarged

5. Conditions of Teeth : All healthy & Intact + missing cavity

6. Respiratory System : Normal/Abnormal

Does physical examination reveal : Yes/No
anything abnormal in the
respiratory organs ?
If yes, explain fully

7. CIRCULATORY SYSTEM

a) Heart : Any organic lesions : Yes/No

Pulse Rate _____ Pmt

b) Blood Pressure : Systolic : _____ mm of Hg

Diastolic : _____

- 8). ABDOMEN : Girth ____Cms Tenderness Present/Absent
Hernia _____
- a) Palpable : Liver _____ Spleen _____
Kidney _____ Tumors _____
- b) Hemorrhoids : _____ Fistula _____
9. NERVOUS SYSTEM : Indication of nervous or mental disabilities : Yes/No
10. Loco-Motor System: Any abnormality : Yes/No
11. Genito Urinary System: Any evidence of hydrocele varicocele etc. _____
: Yes/No
- a) Physical appearance : CLEAR / HAZY
- b) Albumin : ABSENT / PRESENT
- c) Sugar : ABSENT / PRESENT }Report Enclosed
- d) Casts : ABSENT / PRESENT
- e) Cells : WNL / ABNORMAL
12. Report of X-Ray Examination of Chest : Enclosed - NORMAL / ABNORMAL
13. Report of the Blood Exami/HIV Test : Enclosed - NORMAL / ABNORMAL
14. Report of Full Abdomen Ultrasound Test : Enclosed - NORMAL / ABNORMAL
15. Is there anything in the health of the candidate likely to render him / her unfit for the efficient discharge of his/her duties in the services for which he/she is a candidate? : Yes / No
16. Findings :
- The Medical Examiner should record the findings under one of the following categories.
- i) FIT :
- ii) UNFIT on account of :

NOTE:

*In the case of a female candidate, if it is found that the pregnancy is beyond 6 months, she should be declared as temporarily unfit. In case the pregnancy is less than 6 months, the female candidates should

furnish a certificate from specialist gynecologist that her taking up Bank's employment at that stage is no way likely to interfere with her pregnancy or the normal development of the fetus, or is not likely to cause her miscarriage or otherwise to adversely affect her health.

*If there is any abnormal report, further investigation may be advised.

SIGNATURE OF THE MEDICAL EXAMINER.

PLACE: NAME :
DATE: DESIGNATION :

*Such candidate will be advised to contact the Bank for fresh medical examination after three months of confinement.

REPORT BY THE OPHTHALMOLOGIST:

- i) Name of the patient :
- ii) Category of the post :

Acuity of Vision	Naked Glasses	With Glasses	Strength of Glasses		
			Sph	Cyl	Axis
Distant Vision R.E. L.E.					
Near Vision R.E. L.E.					
Hypermetropia (Manifest) R.E. L.E.					

- 1) Any disease of the eyes :
- 2) Night blindness :
- 3) Defect in colour vision :
- 4) Field vision :
- 5) Visual acuity :
- 6) Fundus examination :

PLACE :
DATE :

SIGNATURE OF THE
OPHTHALMOLOGIST
WITH SEAL.



THE EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952 (Paragraph 34)
AND

THE EMPLOYEES' PENSION SCHEME, 1995 (Paragraph 24)

Declaration by a person taking up employment in an establishment in which the Employees' Provident Funds & Employees' Pension Scheme enforce

- I _____
(Name of Employee) Son/ wife/ daughter of _____
Shri/Smt.
- do hereby solemnly declare that :-
- (a) I was employed in _____
M/s (Name and Full Address of the immediate previous employer)
and left service on _____ prior to that, I was
(Date of leaving with immediate previous employer) employed in
_____ from _____ to _____
(Name and Full Address of the second last employer, if any) (Date of joining & leaving with second last employer, if any)
- (b) I was member of _____
(Name of PF Trust / Address of PF Office of immediate previous employer)
Provident Fund and **also/but not*** of the Pension _____
Fund _____ to _____
_____ m _____
(Date of joining & leaving with immediate previous employer).
- and my account number (s) was/were _____
(PF No. with Establishment Code of immediate previous employer)
- (c) I **have / have not*** withdrawn the amount of my Provident Fund/Pension Fund.
- (d) I **have / have not*** drawn any superannuation benefits in respect of my past service from any employer.
- (e) I **have / have never*** been a member of any Provident Fund and/or Pension Fund.
- (f) I am **drawing / not drawing*** Pension under EPS 95.
- (g) I am a **holder / not holder*** of scheme Certificate.
- (h) Scheme certificate **surrendered / not surrendered***.

**Strike out whichever is not applicable.*

Date _____
(Date of joining of employee)

Signature or left hand thumb
impression of the employee

Shri/Smt. _____
(Name of Employee) is appointed _____
as _____
(Designation with Co.)
in M/s _____
(Name of the present employer) with effect _____
from _____
(Date of appointment)

P.F. Account _____
Number (PF No. with Estt. Code of present employer)

Date _____
(Date of joining of employee)

Signature of the Employer/Manager or
Other Authorised Officer with Office Seal

**DECLARATION TO BE SUBMITTED BY THE OTHER BACKWARD CLASSES
CANDIDATES SEEKING RESERVATION AS OBC**

I _____ Son/daughter of
Shri _____ Resident of village/
town/city _____ District _____
State _____. Hereby declare that I belong to the
_____ Community which is recognised as a
backward class by the Government of India for the purpose of reservation in services as per
orders contained in Department of Personnel and Training Office Memorandum No. 36012/22/93-
Estt.(SCT) dated 08.09.1993. It is also declared that as on 31.12.2014, I do not belong to persons
/ sections (Creamy Layer) mentioned in column 3 of the Schedule to the above referred Office
Memorandum dated 08.09.1993.

Place:

Dated (Signature of the candidate)