

ATTESTATION FORM

(THE CANDIDATES SHOULD PROPERLY FILL THE ATTESTATION
FORM WITH HIS/HER OWN HAND WRITING)

Latest colour
passport size
Photograph of
the candidate

**Name of the
Department**

**Name of the Head
of the Dept.**

1.(a) Name in full (capital letters only with aliases, if any. Please indicate if you
have added / dropped at any stage any part of your name/surname.

SURNAME

NAME

(b) Designation of the candidate with category (Appointment by Direct
Recruitment/Ex- Servicemen quote/compassionate ground)
Enclose supporting certified copies of the documents

(i) Designation

(ii) Place of Working

(iii) Direct recruitment

Ex-Serviceman

Compassionate

2. Details of addresses:

a. Present

b. Permanent

House/Apartment/Flat No.

Name of Apartment

Lane Name

Street & Road

Village

Mandal / Taluk

Town / City

District

State

Pin Code

| | | | |
|-----------------------|--------|------------------------------------|---------------------------------------|
| Contact Phone Numbers | Mobile | Landline office (with STD Code) | Landline Residence (with STD Code) |
| | | | |

(c) If originally a resident Of Pakistan, the address in that Dominion and the date of migration to Indian Union

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3. Particulars of places where you have resided during the *preceding five years* from the date of filling up if Attestation From.

| | From (Month / Year) | To (Month / Year) | Residential Address in full (i.e., House / Apartment / Flat Number) (Apartment/Complex/Lane/ Street/Colony and Road, Village,Mandal and District/City) | Police station and District |
|---|------------------------|----------------------|---|--------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

4. Father's details:

(a) Name in full with aliases, if any

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(b) Profession

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(c) If in service, give designation and official address

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(d) Present postal address (if dead, give last address

| | |
|----------------|--|
| House No. | |
| Lane Name | |
| Street & Road | |
| Village/Mandal | |
| Dist | |
| State | |
| Pin Code | |

(e) Permanent House Address

| | |
|----------------|--|
| House No. | |
| Lane Name | |
| Street & Road | |
| Village/Mandal | |
| Dist | |
| State | |
| Pin Code | |

5. (i) Nationality of :

(a) Father

(b) Mother

(c) Wife / Husband

(ii) Place of Birth of Wife / Husband**6. (a) Date of birth of the applicant**

(b) Present Age

(c) Age at SSC / Matriculation

7. (a) Place of birth, District and State

(b) District and State to which you belong

8. (a) Religion

(b) Are you member of Scheduled Caste / Scheduled Tribe / Backward Class?

Scheduled Caste

Scheduled Tribe

Backward Class

Please specify the Class / Tribe Grade A,B,C,D & E

9. Educational Qualifications showing places of education with years in schools and colleges since 15th year of age (**Please enclose certified copies of Study Certificates and indicate whether study is regular or distance / correspondence**).

| Course | Name of the School / College with full address (Village / Mandal / District / City) | Date of entering (mention month & year) | Date of leaving (mention month & year) | Examination passed with Reg.No.etc. (Name of the group i.e., Inter/Degree/ Diploma/ PG,etd) | Police Station and District |
|------------------------------------|---|---|--|---|-----------------------------|
| 1. SSC/ Matriculation | | | | | |
| 2. Intermediate/ Diploma | | | | | |
| 3. Graduation/ Professional Course | | | | | |
| 4. Post Graduation | | | | | |
| 5. Any other qualification | | | | | |

10. If you have at any time been employed, give details, **(Please enclose certified copies of the documents).**

| Designation of Post held or description of work | Period | | Full Address of the Office, Firm or Institution | Have you been at any time dismissed / removed from service / resigned to the post? If so, please give details. |
|---|--------|----|---|--|
| | From | To | | |
| | | | | |

11. Have you ever been arrested by the police, convicted by a Court of law or detained under any state /central preventive detention laws for any offence? Whether such conviction sustained in the Court of Appeal or set aside by the Appellate Court if appealed against.

(Note: If detailed, convicted, debarred etc. subsequent to the completion and submission of this form, the details should be communicated immediately to the concerned Department 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 suppression of factual information). If the answer is 'Yes', the full particulars of the conviction, sentences and detention should be given.

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12. Name and complete address of two responsible persons of your locality to whom you are known or two referees to whom you are known. **(Persons shall not be blood relatives).**

| | Referee-1 | Referee-2 |
|-------------------------------|-----------|-----------|
| House/Apartment/ Flat. No. | | |
| Name of Apts./ Complex | | |
| Lane Name | | |
| Street & Road | | |
| Village | | |
| Mandal/Taluk | | |
| Town/City | | |
| District | | |
| State | | |
| Pin Code | | |

13. Have you ever been member/worker of any Political Party or Communal organization/Youth/Student/Service/Labour? If so furnish details

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DECLARATION SHOULD BE SIGNED BY THE CANDIDATE

1. I here declare that the statements made in this form are true to the best of my knowledge and belief.
2. I am married/unmarried and have only one wife living (delete which is not applicable).
3. I am fully aware that furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification and is likely to render me unfit for employment under the Government.
4. I am also fully aware that if it comes to notice at any time during my service that false information has been furnished or that there has been suppression of factual information in the Attestation Form, my services would be liable to be terminated solely on this ground.

Date:

Signature of Candidate

Place:

**CERTIFICATE TO BE SIGNED BY A GAZETTED OFFICER OR MEMBER OF
LEGISLATURE OR OTHER AUTHORITY AS PRESCRIBED BY THE
APPOINTING AUTHORITY**

Certified that I have known Sri / Smt / Kum. _____

_____ Son / Daughter / Wife of _____

For the last _____ years _____ months and to the best of my knowledge and belief,
the particulars furnished by him / her are correct.

Date:

(Signature)

Name & Designation with Seal

Place:

Photograph of the
candidate attested
by Gazetted Officer
/ MLA / other with
seal Competent
Authority

CERTIFICATE OF RESIDENCE

(To be produced by such candidates who have not studied in any educational Institution during the whole or any part* of the relevant 4/7 years period but claim to be local candidates by virtue of residence for Post Codes for which there is reservation for Local candidates.

It is hereby certified.

(a) _____ that
Sri/Smt./Kum _____
S/o. W/o. D/o . _____ appeared for the first time
for the Matriculation (S.S.C.) Examination in
_____ (Month) _____ (Year).

(b) That he/she has not studied in any educational institution during the whole/or part of the 4/7 consecutive academic years ending with the academic year in which he/she first appeared for the aforesaid examination.

(c) that in the 4/7 years immediately preceding the commencement of the aforesaid examination he/she resided in the following place/places namely;

| SI.No. | Village | Mandal | District | Period |
|--------|---------|--------|----------|--------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |

OFFICE SEAL:

STATION:

DATED:

Officer of Revenue Department
not below the rank of Mandal
Revenue Officer holding
independent Charge of a Mandal.

* STRIKE OFF "WHOLE"/PART AS THE CASE MAY BE.

FORM FOR COMMUNITY, NATIVITY AND DATE OF BIRTH CERTIFICATE

Serial No.

S.C.

Seal of the

District Code:

S.T

Issuing

Mandal Code :

B.C

Office

Village Code :

Certificate No:

COMMUNITY, NATIVITY AND DATE OF BIRTH CERTIFICATE

(1) This is to certify that Sri/Smt./Kum. _____
Son/Daughter of Sri _____ of Village/Town
_____ Mandal _____ District _____ of
the State of Telangana belongs to _____ Community which is recognised as (*)
S.C./S.T./B.C. sub-group _____

The Constitution (Scheduled Castes) Order, 1950
The Constitution (Schedule Tribes) Order, 1950

G.O.Ms.No:1793, Education, dated: 25.9.1970 as amended from time to time (BCs.) /
S.Cs. S.Ts. list (modification) Order, 1956 S.Cs. And S.Ts. (Amendment) Act, 1976.

(2) It is certified that Sri/Smt./Kum. _____ is a
native of _____ Village/Town _____ Mandal _____ District of Telangana.

(3) It is certified that the place of birth of Sri/Smt./Kum.
_____ is _____ Village/Town _____ Mandal
_____ District of Telangana.

(4) It is certified that the date of birth of Sri/Smt./Kum.
_____ is _____ Day _____ Month _____ Year
_____ (in words) _____ as per the declaration given by his/her
father/mother/guardian and as entered in the school records where he/she studied.

Signature:

Date:

Name in Capital Letters:

Designation:

(Seal)

Explanatory Note:- While mentioning the community, the Competent Authority must mention the sub-caste (in case of Scheduled Castes) and sub-tribe or sub-group (in case of Scheduled Tribes) as listed out in the S.Cs. and S.Ts. (Amendment) Act, 1976.

DECLARATION BY THE UN-EMPLOYED
Who claim fee exemption

1. Name of the Candidate :

2. Father's Name :

3. Date of Birth & Age :

4. Centre for Written Examination

5. Full Postal Address :

I hereby declare that I am not working in any Government Department/ Quasi Government/Public Sector/Private Sector.

I further declare that the information furnished by me is true and correct and my candidature shall be cancelled at any stage if it is found incorrect.

PLACE

DATE

FULL SIGNATURE OF THE CANDIDATE.
(Declaration not signed by the candidate
will be rejected)

TELANGANA STATE PUBLIC SERVICE COMMISSION :: HYDERBAD

LANGUAGE PANDIT IN SCHOOL EDUCATION DEPARTMENT

NOTIFICATION NO. 54/2017 Dt:21/10/2017

BASIC INFORMATION DATA

(CHECK LIST)

(To be filled by the candidate)

TSPSC ID :

Ref ID :

HALL TICKET NO :

SUBJECT :

MEDIUM :

DATE OF VERIFICATION :

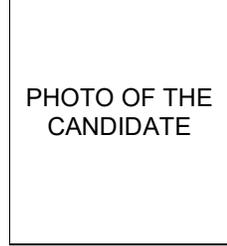


PHOTO OF THE
CANDIDATE

Signature

| | | | | | |
|----|---|------------------------|---------------|---------------------------------------|---------------------------|
| 01 | Name of the Candidate (as per SSC) | | | | |
| 02 | Father's Name | | | | |
| 03 | Mother's Name | | | | |
| 04 | Gender | Male | | Female | |
| 05 | Date of Birth (as per SSC) | D D | M M | Y Y Y Y | |
| | | □ □ | □ □ | □ □ □ □ | |
| 06 | (Age as on 02/07/2017) | Years | Months | days | |
| | | □ □ | □ □ | □ □ | |
| 07 | Qualification (as on 21/10/2017) i) Graduation ii) PG iii) BED iv) HPT | As per Notification | Qualification | Date of acquiring qualification | Name of the University |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | Official use : | | | |

| | | | | | | | | | |
|---------------|---|--|----|---|----|----|---|---|---|
| 08 | Community(integrated Community Certificate Issued by M.R.O for SC/ST/BC from Telangana State Govt) with Father/ Mother name | OC | SC | ST | BC | | | | |
| | | | | | A | B | C | D | E |
| | | | | | | | | | |
| Official use: | | | | | | | | | |
| 09 | BC Candidates should Submit Non Creamy Layer certificate as per G.O.Ms.No:8 of 2014 & MemoNo.3009/BCW/ OP/2011, Dt:18-12-2015. | Whether non-creamy layer certificate produced | | YES | | NO | | | |
| | | Official use : | | | | | | | |
| 10 | PH –Category | VH | | HH | | OH | | | |
| | | Official use : | | | | | | | |
| 11 | If age relaxation is claimed, specify 1) Retrenched Census Employee 2) Telangana State Govt. Employee 3) N.C.C 4) Ex-Service Men 5) SC/ST and BC | <div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">Years</div> (No. of years claimed for relaxation) | | Whether relevant Certificate Produced YES NO <input type="checkbox"/> <input type="checkbox"/> | | | | | |
| | | Official use : | | | | | | | |

| | | Class/ Residence | Year | District | State |
|----|--|---------------------|------------------------|----------|-------|
| 12 | Indicate the evidence (Original Study Certificate to be produced) OR Residence certificate for 7 yrs. Prior to SSC if private Study. | IV | | | |
| | | V | | | |
| | | VI | | | |
| | | VII | | | |
| | | VIII | | | |
| | | IX | | | |
| | | X | | | |
| | | 13 | District you belong to | | |
| 14 | Present Employment details (Government Employees should submit NOC) | | | | |
| | | Official use: | | | |

Declaration

I hereby declare that

- i) All the columns filled in by me containing my biodata and other particulars, are true to the best of my Knowledge.
- ii) The certificates such as, my educational qualification, community certificate, date of birth (SSC), study/residence in support of my claim for local candidature are genuine.
- iii) I did not resort to any irregular or improper means in connection with my candidature for selection.
- iv) I am liable for permanent debarment from appearing for the recruitment to be conducted by TSPSC and other PSCs and also criminal prosecution, if I am found involved in any unfair means / malpractice.
- v) I further declare that the information furnished by me is correct and my candidature shall be cancelled at any stage if it is found incorrect.

15

Address.

.....
.....
.....

Mobile No......

Place:

Date:

Signature of the candidate.

TO BE USED FOR ADMISSION (OFFICIAL USE)

The Candidate is finally admitted for further process for selection (YES/NO)

VERIFICATION OFFICER

CHIEF VERIFICATION OFFICER

TO BE USED FOR REJECTION

If not finally admitted remarks:

VERIFICATION OFFICER

CHIEF VERIFICATION OFFICER

CAMP OFFICER

SCHOOL STUDY CERTIFICATE

NOTE: Should be obtained from the Head of Educational Institution(s).

1. Name of the Candidate :

2. Father's Name :

3. Date of Birth & Age :

4. Place of Birth :

| Class | Name and Place of School | District | Duration of Study giving month and year |
|--------------|---------------------------------|-----------------|--|
| IV | | | |
| V | | | |
| VI | | | |
| VII | | | |
| VIII | | | |
| IX | | | |
| X or SSC. | | | |

STATION:
DATE:

Signature of the Head of the
Educational Institute(s)