## परिशिष्ट-ए/APPENDIX-A

Roll	No	(To be filled by the Zonal HQrs / ARCs)
		TO THE POST OF ASSTT. SUB INSPECTOR RTMENTAL COMPETITIVE EXAMINATION – 2021.
1	CISF No:	
2.	Rank :	
3.	Cadre [Only Head Constable/GD, Cor	/ tillx recent
	Constable(Tradesmen) are eligible] _	size photograph duly dated (i.e.
4.	Name :	not more than
5.	Father's Name:	three months old from the date of
6.	Date of birth :	Hom the date of
	(Attach certificate as per instructions)	this Notification) in uniform
7.	Sex (Male/Female) :	
8.	Mobile No :	
9.	Email id :	
10.	Whether belong to SC/ST :	
	(Attach certificate as per instructions)	
11.	Religion:	
12.	Whether belong to Hilman etc. :	
	(Attach certificate as per instructions)	
13.	Date of appointment in CISF:	
14.	Present Unit (in case on deputation,	
	please indicate name and address of	
	the present department and also the	
	name of the parent unit where from	
	you had joined for deputation):	
15.	Details of punishment awarded (if any	) Major :
		Minor :
16.	No. of chances so far availed for :	
	appearing in the LDCE	
17.	Educational qualifications (Attach cer	tificate as per instructions):

• •

Certified that all the information as furnished by me in this application are true and in case at any stage, any of them is/are found incorrect or false, the competent authority can reject my candidature without assigning any reasons thereof.

Further certified that I have not availed three chances so far in competing in this examination and information furnished by me against column 16 is correct. In case at any stage, even after my appointment (if I am selected to the post) this information is found false or incorrect, my candidature may be rejected/I may be reverted back to my substantive post, as the case may be, by the competent authority, without assigning any reasons thereof and also competent authority may take any appropriate disciplinary action against me for furnishing of false and incorrect information.

Date:	
Place:	Signature of the candidate

#### CERTIFICATE

It is certified that the data mentioned above have been verified from the service records of the individual and found to be correct.

**GAZETTED OFFICER OF THE UNIT** 

#### **CERTIFICATE OF UNIT COMMANDER**

(To be filled by the Unit Commander/The Department where the candidate is presently posted/on deputation (as the case may be) after verifying from the service book or the certificate produced by the candidate)

lt i	s certified that :-
1.	His/her date of birth is
2.	He/she belongs to SC/ST category and has attached copy of certificate on the prescribed proforma duly attested by a GO with the application form;
3.	He/she belongs to Hill area etc and has attached copy of certificate on the prescribed proforma duly attested by a GO with the application form;
4.	He/she has completed 5 years' service as on 01-08-2021 (appointed on or before 31.07.2016)
5.	No criminal case is pending against him/her.
6.	No Criminal/DE/Vigilance cases including sexual harassment charges are either pending or contemplated against him.
po aw	Certified that the Department/Office has no object in permitting CISF No.  Rank Name for applying to the st of Name no object in permitting CISF No.  Rank Name has not been warded with any punishment (Major/Minor) till date and his performance for the st 05 years of service in this Department/Office has been above "AVERAGE".
Da Pla	ate: <u>Signature of Unit Commander</u> ace: Name
	Designation(Office Seal)
	TO BE FILLED AT THE ZONAL HORS (ABS.)

### TO BE FILLED AT THE ZONAL HQRS (ARCs)

Accepted/Rejected (if rejected, give reasons therefore)

Signature & Name of officer authorized to scrutiny the application (Office Seal)

### **CERTIFICATE**

## (ANY WRONG CERTIFICATION WILL CAUSE CANCELLATION OF CANDIDATURE AND DEPARTMENTAL ACTION)

I certify that	
----------------	--

a)	No Criminal	case is	pending	against me.
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- b) No D.E. is pending against me.
- c) No sexual harassment case is pending against me.
- d) I have completed 5 years of service on ......
- e) Only for SC/ST candidates

"I belong to Scheduled Caste/Scheduled Tribe and entered into service claiming the benefits on the basis of the certificate of this caste/tribe".

f) For the persons hailing from hill area: "I belong to hill area and had entered into the service by claiming the benefits on this basis".

In case any statement from the above is found untrue, I am liable to abide by the action/decision of the department.

Signature of the applicant	t: .						
	(Nar	ne,	CISF	No.	, Rank	&	Unit)

## प्रश्नावली / QUESTIONNAIRE FORM

1	क्या आपको कमी किसी न्यायालय या किसी न्यायिक संस्थान द्वारा दोषी साबित किया गया है ?	हां / नहीं		
	Have you ever been convicted by any court of law or any other judicial	YES/NO		
	institution?			
2	क्या आपके खिलाफ किसी न्यायालय में कोई मुकदमा लंबित है?	हां / नहीं		
	Is there any case pending against you in any court of law?	YES/NO		
3	क्या आपके खिलाफ कभी कोई एफआईआर दर्ज की गई है और क्या आपके खिलाफ केस चल रहा	हां / नहीं		
	है?	YES/NO		
	Has any FIR been lodged and case is pending against you?			
4-	Was any FIR ever lodged against you in the past?	हां / नहीं		
	या आपके खिलाफ पूर्व में कोई एफ आई आर दर्ज की गई थी	YES/NO		
	क. यदि हॉ तो केस संख्या और एफ.आई.आर. किस धारा के अधीन दर्ज की गई थी ?			
	a If yes, case No. and sections under which FIR was lodged?			
	ख. उस पुलिस स्टेशन का नाम जहां पर एफ.आई.आर दर्ज की गई थी ?			
	b Name of Police Station where FIR was lodged?			
	ग. क्या केस चार्जशीट किया गया था अथवा एफ.आर. में वापिस कर दिया गया था ?			
	c Was the case charge sheeted or returned in FR?			
	घ. यदि केस चार्जशीट किया गया था तो न्यायालय में इसका क्या परिणाम रहा ?			
	d If case was charge sheeted, what was the outcome in court?			
	(क) दोषी ठहराया गया (i) Convicted			
	(ख) दोषमुक्त किया गया (ii) Acquitted			
	(ग) समझौता हुआ (iii) Compromised			
	(घ) उसका सामना किया (iv) Compounded			
	(ड) कोई अन्य कृपया उल्लेख करें। (v) any other. Please specify			
5	क्या आपको कभी केन्द्रीय या राज्य सरकार की किसी सेवा से बर्खास्त/निष्कासित किया गया है?	हां / नहीं		
	Have you ever been dismissed/removed from any service under the	YES/NO		
	Central or State Govt?			
6	क्या आपको कभी परिवीक्षा के दौरान सेवा से समापन किया गया है ?	हां / नहीं		
	Have your service ever been terminated while on probation?	YES/NO		
	उपरोक्त में से किसी का भी जवाब हां में है तो कृप्या पूर्ण विवरण अलग पृष्ठ पर दें।			
	e answer to any one of the above is YES then please provide complete det	ails on a		
sep	arate sheet			
	तन्त्रनं / LINDEDTAKING			

#### वचनबंघ/UNDERTAKING

मैं	घोषित करता हूं कि उपरोक्त सूचना मेरी
जानकारी और विश्वास से पूर्णतया सत्य	हैं । मै यह समझता हूँ कि अगर उक्त सूचना
मिथ्या या असत्य पाई जाती है तो किसी ।	वेभागीय अथवा न्यायिक प्रकिया जो मेरे विरूद्ध
शुरू की जायेगी के अलावा मेरी उम्मीदवारी	को भी समाप्त किया जा सकता है।
	at the above information is true to the best of
	in case the information is found to be false or
incorrect my candidature is liable to be c proceedings that may be initiated against m	ancelled apart from any departmental or legal e.

आवेदक के हस्ताक्षर Signature of the candidate नाम/Name बल संख्यां/CISF No. पद/Rank

स्थान / Place दिनांक / Date

## परिशिष्ट बी−2 / APPENDIX B-2

## **CERTIFICATE ON PAST PUNISHMENT / DEPARTMENTAL ENQUIRY**

1.	Have you ever been punished in course of any Departmental Enquiry	Yes/No
2.	Is there any Departmental Enquiry pending against you in any unit?	Yes/No
3.	According to best of your knowledge, is any complaint of any kind pending against you?	Yes/No
4.	Was any Departmental Enquiry ever conducted against you in the past?	Yes/No
	a) If yes, section under which DE was conducted?	Major/ Minor
	b) Name of the Unit where DE was conducted.	
	c) If DE was conducted, what was the outcome?	
	i) Found Guilty/exonerated by Disciplinary Authority	Found Guilty / Exonerated
	ii) Exonerated by Appellate Authority	Yes/No
	iii) Exonerated by Revisioning Authority.	Yes/No
	iv) Any other, please specify.	

## **UNDERTAKING**

	pelief. I understand that in case the information is found to be lature is liable to be cancelled apart from any departmental or
	Signature of the candidate
	Name :
Place:	CISF No
Dated:	Rank :

# FORM OF CERTIFICATE TO BE PRODUCED BY A CANDIDATE BELONGING TO SCHEDULED CASTE OR SCHEDULED TRIBE

This is to certify that Shri/Shrimati/Kumari
son/daughter of Shri of village/Town
District/Division of the State/Union Territory
belongs to the caste/Tribe which is recognized as a Schedule
Caste/Scheduled Tribe under
*The Constitution (Scheduled Caste) order , 1950
*The Constitution (Scheduled Tribes) order, 1950
*The Constitution (Scheduled Castes)(Union Territories) order,1951
*The Constitution(Scheduled Tribes) (Union Territories) order, 1951
(As amended by the Scheduled Castes and Scheduled Tribes (Modification) order
1956, the Bombay Reorganization Act, 1960, the Punjab Reorganization Act, 1966, the Sta
of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganization) Act, 1971, and the
Scheduled Caste and Scheduled Tribes Orders (Amendment) Act 1976.)
*The Constitution (Jammu & Kashmir) Scheduled Castes order, 1956;
*The Constitution (Andaman & Nicobar Islands) Scheduled Tribes Order, 1959 a
amended by the Scheduled Castes and Scheduled Tribes Orders (Amendment) Ad
1976
*The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order, 1962
*The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Order, 1962
*The Constitution (Pondicherry) Scheduled Castes Order, 1964
*The Constitution (Scheduled Tribes)(Uttar Pradesh) Order, 1967
*The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968
*The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968
*The Constitution (Nagaland) Scheduled Tribes Order, 1970
*The Constitution (Sikkim) Scheduled Caste Order, 1978
*The Constitution (Sikkim) Scheduled Tribes Order, 1978
*The Constitution (Scheduled Castes) Order (Amendment) Act, 1990
*The Constitution (Scheduled Tribes) Order (Amendment) Ordinance, 1991
*The Constitution (Scheduled Tribes) Orders (Second amendment) Act, 1991
*The Constitution (Scheduled Tribes) Ordinance, 1996
*2. This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe
Certificate issued to Shri/Smt Father/Mother of Shri/Smt./Kuma
of village/Town in District/ Division
of the State/UT who belongs to the
Caste/Tribes which is recognized as a SC/ST in the
State/Union Territory issued by the
(name of the prescribed issuing authority) vide the
No;
or
Shri/Shrimati/Kumari and or his/her family ordinari reside(s) in Village/Town of District/Division of
reside(s) in Village/Town of District/Division
the State/Union Territory of
Signature
Place Designation
Date (With seal of Office)
*Please delete which are not applicable.
NOTE : The terms 'ordinarily' reside(s) used here will have the same meaning as in
Section 20 of the Representation of the People Act. 1950. (P. T. O.)

## List of authorities empowered to issue Caste/Tribes Certificate

- District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/ Additional Deputy Commissioner/Dy. Collector/1<sup>st</sup> Class Stipendiary Magistrate/Sub Divisional Magistrate/Extra-Assistant Commissioner/Taluka Magistrate/Executive Magistrate.
- 2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- 3. Revenue Officers not below the rank of Tehsildar.
- 4. Sub-Divisional Officers of the area where the candidate and/ or his family normally resides.

**Note:** ST candidates belonging to Tamil Nadu State should submit caste certificate **ONLY FROM THE REVENUE DIVISION OFFICER.** 

# FORM OF CERTIFICATE TO BE SUBMITTED BY THOSE CANDIDATES WHO INTEND TO AVAIL RELAXATION IN HEIGHT OR CHEST MEASUREMENT [SEE NOTE 2 BELOW PARA 2(C)]

	Certified that Shri/Kumari			S/o/D/o Shri	
village		is Tehsil/Taluk	permanent	resident	o Distric
	of		State.		
2.	It is further certified that :-				
	*Residents of entire ar Kumaouni, Dogras, Ma measurement for recruit	ırathas, Sikkimi	es) for relaxation	n in height àr	nd ches
	*he belongs to Himachal is considered for relaxat the para military forces o	tion in height an	d chest measure		
	*he belongs to considered for relaxatio the para military forces of		chest measurer	si community nent for recrui	
Dated: Place: Magist			Siç District Magistra	gnature te/Sub Divisior	nal
*Delet	e whichever is not applicab	le.			

## **DETAILS OF APPLICATIONS ACCEPTED BY CONCERNED ZONAL DISG (ARCs)**

Name of Zonal DIG (ARCs):\_\_\_\_\_

S.No.	Roll No.	CISF No.	Rank	Name	Father's Name	Sex	Unit
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

No. of attempts previously availed	Date of Apptt. in CISF	Date of Birth	Educational Qualification	Category (UR/SC/ ST)	Whether Hillman	Religion	Remarks, if any
(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

Signature of Zonal DIG/ARCs