ACCEPTANCE OF OFFER OF APPOINTMENT TO THE POST OF TRAINED GRADUATE TEACHER (TGT)___ON REGULAR BASIS IN EDUCATION DEPARTMENT, CHANDIGARH ADMINISTRATION & EMPLOYEE INFORMATION FOR CREATING EMPLOYEE ID AGAINST ADVERTISEMENT NO.05/2023 DATED 09.02.2024

 I
 _______do hereby accept all the terms and conditions mentioned in the provisional offer letter of appointment to the post of Trained Graduate Teacher (TGT)

 _______offered to me vide memo no.
 _______dated

I hereby submit my particulars as under:-

- 1. First Name _____
- 2. Middle Name _____
- 3. Last Name_____
- 4. Date of Birth (in figures)
- 5. Age as on 01.01.2024 <u>Years</u> Month Days
- 6. Gender (Male/Female/Others)
- 7. Mother's Name
- 8. Father's name :
- 9. Marital Status _____
- 10. Spouse name (if, married) :_____
- 11. Nationality:_____
- 12. Religion:
- 13. Category: Gen. / SC/ OBC / EWS
 - If, OBC/SC/EWS certificate No. & Date of issue :-

Details of certificate issuing Authority with complete address:

14. Academic / Professional Qualifications:-

Sr. No	Name of the course /	Name of the Board /	Name of Institute	Whether the Institute is Private or	Year of Passing	Perce- ntage	Duration of Course	Whether Regular or
	degree etc.	Univ.		Government			Course	Distance Mode

15. Details of post (s) held previously, if any:

Name of post	Date of joining	Date of leaving	Name of Department with Address

16. Present /Correspondence Address (at which further communication shall be made)

Latest Photograph

Pin Code

Pin Code

Mobile No. E-mail ID

17. Permanent Address

Mobile No. E-mail ID

18. Passport No. (if available) : _____

ABHA No. (Ayushman Bharat Health Account) : _____ 19.

- 20. Aadhaar No.
- Please confirm the following detail. If no achievement please mention N/A:-21.
 - **RESEARCH** Publication of Books, Articles, etc: a)
 - b) Participation in Training Camps/Seminars:
 - Professional/Vocational qualifications, if any: c)
 - d) Scholastic Honours - Fellowships and Scholarship, if any:
 - e) What subject in college interested you most and why?
 - f) LANGUAGES: Underline your Mother-tongue and proficiency in other Languages:
 - Mother-tongue i.
 - ii. Speak
 - iii. Read
 - Write iv.
 - **EXTRA CURRICULAR ACTIVITIES :** g)

h) **LEADERSHIP QUALITIES:**

- i. Were you a captain of a college team? Yes / No
- ii. Were you a member/captain of a University team? Yes / Noiii. Were you an under officer or above in NCC? Yes / No
- Were you a secretary/president of a University Union? Yes / No iv.
- v. Name your hobbies and membership of professional organizations.
- If employed, give the name & address of your present & past employer (s). Also, give i) your avocation, business or otherwise including employment after completion of your education upto the date of your joining the Department.
 - Position held, exact designation and nature of work (i)
 - (ii) Nature of business
 - (iii) Period From To

Note: If you have worked with more than one employer, give your employment history as above in a separate sheet of paper.

- Social Media Ids (mention all if more than 1) j)
 - E-mail: (i)
 - (ii) Facebook:
 - Instagram: (iii)
 - LinkedIn: (iv)
 - Others: (v)

- 22. Have you ever been prosecuted? **Yes / No**
- 23. Have you ever been kept under detention? Yes / No
- 24. Have you ever been bound down? **Yes / No**
- 25. Have you ever been fined by a Court of Law? **Yes / No**
- 26. Have you ever been convicted by a Court of Law for any offence? Yes/No
- 27. Have you ever been debarred from any examination or rusticated by any University or any other educational authority, institution? **Yes / No**
- 28. Have you ever been debarred/disqualified by any Public/ Staff Selection Commission or any of if examination/ selection? **Yes / No**
- 29. Is any case pending against you in any Court of Law? Yes / No
- 30. Is any case pending against you in any university or any other educational authority institution? **Yes / No**
- 31. Whether discharged/expelled/withdrawn from any training/ institution under the Government or otherwise? Yes/ No
- 32. Have you ever been arrested? Yes / No
- 33. Have you ever surrendered your Indian citizenship? (Yes/No) if yes, please give details
- 34. Have you ever acquired permanent residency, Green card or residency of any other country other than India? (Yes/No), if yes please give details.
- 35. Any other relevant information:-

NOTE: All information must be typed and signed in Black/Blue Ink Pen.

DECLARATION (STRIKE OUT ANY IRRELEVANT CLAUSE)

I solemnly affirm and declare that:-

- a) I have never been debarred nor declared unfit for any Public Examination / Govt. job by Central / State / UT Govt.
- b) That I am unmarried / widower / widow /divorcee.
- c) That I am married and have only one living spouse.
- d) That I have entered into or contracted a marriage with a person having a spouse living. Application for grant of exemption is enclosed.
- e) That I have entered into and contracted a marriage with another person during the lifetime of my spouse. Application for grant of exemption is enclosed.
- f) That, I have never been debarred by any Board/University/ Commission in any examination. If at any stage it is found false or detected incorrect, my candidature / selection / appointment is liable to be cancelled / terminated automatically without any notice to me and action be taken against me accordingly.
- g) (For EWS candidates), That the condition of status / annual income and other assets for EWS category of my family is within the prescribed limits as on financial year ending on March, 31, 2024. I understand that my appointment offer will stand cancelled in case the "EWS Certificate" submitted by me is found unauthentic / invalid.
- h) (For OBC Candidates), That I belong to the community which is recognized as a OBC by the Department of Social Welfare, Chandigarh Administration for the purpose of reservation in service / appointment in Education Department, Chandigarh

Administration. It is also declared that I do not belong to persons / sections (Creamy Layer). I also declared that the condition of status / annual income for creamy layer of my parent / guardian is within the prescribed limits as on financial year ending on March, 31, 2024 as per guidelines issued by the Chandigarh Administration from time to time. I understand that my appointment offer will stand cancelled in case the "Non-creamy Layer Certificate" submitted by me is found unauthentic / invalid.

- i) The information given above / submitted is true and correct to the best of my knowledge and belief and nothing has been concealed.
- 2. I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Candidate's Signature _____

Name _____

Roll No._____

Application No._____

Dated:

SELF DECLARATION FORM

I _______s/o, d/o, w/o ______ whose name, photograph, signature and other particulars are mentioned in the application form / acceptance of offer of appointment and other educational certificates etc. do hereby undertake that I am the same person who had applied for the post of Trained Graduate Teacher(TGT) on regular basis in Education Department, Chandigarh Administration against advertisement no.05/2023 dated 09.02.2024 and appeared in the written test held on dated

_____under Roll No._____Application/Regd.No._____ and scored ______marks as per result uploaded by recruitment agency on website.

(Candidate has to write above mentioned statement in his/her running handwriting in the box given below.)

SIGNATURE OF CANDIDATE (To be signed before the verifying authority)

Name _____

Roll No._____

Application No._____

LEFT THUMB IMPRESSION

OATH OF ALLEGIANCE

I ______do solemnly affirm /swear that I will bear true faith and allegiance to the Constitution of India as by law established, and that I will uphold the sovereignty and integrity of India, and that I will carry out the duties of my office loyally, honestly and impartially.

Date :

Candidate's Signature

Name _____

Roll No._____

Application No._____

Form-4

ATTESTATION FORM / MEDICAL FORM(8 pages)

• • •	Affix signed passport size (5 cm. X 7 cms. approx.) copy of recent photograph	 "WARNING" 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 the Director School Education, Chandigarh Administration, 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.
(b) Ha	ave you ever added or dropped in any tage any part of your name or surname: es/No	
(If	f Yes, provide details)	
Di He Ci	resent address in full (i.e., Village, Thana, istrict, State and Pin code or ouse No., Lane/Street/Road & Locality, ity, State and Pin code) ermanent addressin full (i.e., Village, Thana,	
Di or He	istrict, State and Pin code	
4. Aa	adhar Card No.	
5. Pe	ermanent Account Number (PAN)	
6. Na	ationality	

Candidate's Signature

7.(a)	Date of Bir	th		
	(DD/MM/Y	YYY)		
(b)	Present Ag	je	Years	MonthsDays
	(at the time	e of filling the		
	form)			
(c)	Age at the	time of passing		
	Matriculatio	on		
8.(a)	Place of bi	rth, district and		
	state in wh	ich situated		
(b)	District and	d state to which		
	you belong)		
(C)	District and	d state to which		
	your father	roriginally		
	belongs			
9.(a)	Religion			
(b)	Scheduled Scheduled Backward Layer) / Ot Class (Nor	l Tribe/ Other Class (Creamy ther Backward n- Creamy Layer)/ ally Weaker		
10.	Particulars		ation) where you ha	ave resided during the preceding five
	Address:-			
	[In case of			culars of all places where you have
From (Month, Year	To (Month, Year)	Address in Full (i.e District, State, Pin No., Lane/ Street/ Locality, City, Stat	e Village, Thana, code or House Road and	he age of 21 years, should be given)] Name of District Head Quarter of the place mentioned in the preceding column.
		Pin code)		

Candidate's Signature

11.		Name (in full & aliases if any)	Nationality (by birth &/or by domicile)	Place of Birth	Occupation if employed – Give designation and Officia Address	d Postal Address n (If dead,		
(a) Fathe	er				71001000		,	
(b) Moth	er							
(c) Spou								
(d) Broth	ner(s)							
(e) Siste	r (s)							
		tion to be furnished / living in a foreign		o son(s) ar	nd/ or daugh	ter(s) in cas	e they are	
Name		Nationality (by	Place of	Country i	Country in which		Date from which	
		birth &/ or by	Birth	studying/	living with	studying	/ living in the	
		domicile)		full addre	full address		country mentioned in	
							ious column	
13.	Educ	ational Qualification	showing pla	ces of edu	cation with y	ears in Sch	ools and	
	Colle	ges since 15th year	r of age.					
Name of School/Col		lege (with full addre	ss)	Date o	f Entering	Date of	Examination	
						Leaving	Passed	

Passport No. (if available) :_____

Aadhar No:-

Candidate's Signature

3

14.(a)		holding or have any time he				
		overnment or a Semi- Gover mous body, or a public under				
	give ful	l particulars with dates, of en	nployment, up-to-date.	Reasons for		
From	Period To	Designation, Emoluments and Nature of Employment	Emoluments and of employer Nature of			
14. (b)	under	previous employment was un taking owned or controlled by omous body/ University/ Loca	y the Govt. of India or a Sta			
	servic were a upon notice	had left service on giving a r es (temporary service) rules, any disciplinary proceedings to explain your conduct in an of termination of service, or actually terminated?	, 1965, or any similar corres initiated against you, or hac y matter at the time at the t	ponding rules you been called ime you gave		
15. (i)				Answer in		
	(a)	Have you ever been kept u	nder detention?	'Yes" or 'No"		
	(b)	Have you ever been arreste	ed?			
	(c)	Have you ever been prosec	cuted?			
	(d)	Is any criminal case pendir	any criminal case pending against you in any			
		Court of Law at the time of				
		form and charge-sheet in th not?	nat case has been filed or			
	(e)	Have you ever been convic any offence?	ted by a court of law for			
	(f)	Whether discharged/expelle training/ institution under th otherwise?	-			
	(g)	Have you ever been rustica any other educational autho				
	(h)	Have you ever been debarr Public service commission examination/ selection?	red/ disqualified by any			

Candidate's 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:

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)

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

PASTE PHOTO HERE

TO BE FILLED BY THE OFFICE

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

Dy. Director (Schools) O/o Director School Education Additional Deluxe Building Sector-9, UT, Chandigarh

(ii) Post for which the candidate is being considered: Trained Graduate Teacher (TGT)

FORM OF MEDICAL CERTIFICATE

I hereby certify that I have examined Sh./Smt./Kum.
a candidate for employment in the Education Department, Chandigarh Administration 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 Education Department, Chandigarh Administration.
The age of Sh./Smt./Kumaccording to his/her own statement
isyears, and by appearance is aboutyears.
(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. 2.	Name in full (in BLOCK letters) 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, rheurnatism or appendicitis? OR	
Ćco	ny other disease or accident requiring onfinement to bed and medical or surgical eatment?	
4.	When were you last vaccinated?	
5.	Have you or any of you 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/u for Govt. Service by a medical officer/ Medical Board within the last three years?	nfit

8. Furnish the following particulars:

Father's age, if living, & state of heath	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.

Candidate's signature

Date:

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 willfully suppressing any information the candidate will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to superannuation allowance or gratuity.

-2-

IDENTITY CERTIFICATE & CHARACTER CERTIFICATE

- 1. Certified that I have known Sh./Smt./Kumari_____son/daughter of Sh._____Resident of......Tehsil...... District......State.....for the last ____year(s); and
- 2. That to the best of my knowledge and belief:
 - (a) the particulars furnished by him/her in the Form(s) for Trained Graduate Teacher(TGT) to Department of School Education UT Chandigarh are correct; and
 - (b) he/she bears a reputable character and has no antecedents which render him/her unsuitable for Government Employment; and
 - (c) he/she bears a good moral character; and
 - (d) he/she has not been convicted by any civil court; and
 - (e) he/she has never been imprisoned; and
 - (f) he/she has not been dismissed from any Govt. service.
- 3. That Sh./Smt./Kum._____is not related to me.

Candidate photo to be pasted. To be signed across by the Official (signature should not be done on the face).	Sign: (Candidate to fill name and sign before the official)
Date:	Signature of Official:
Place:	Name of Official:
	Designation:
Office reference No	Office Address:
Office Stamp	

*at least 1 year

(Certificate to be signed by any one of the following)

- ii) Members of Parliament or State Legislative belonging to the constituency where the candidates or his parent/guardian is ordinarily resident;
- iii) Class 1 Gazetted Officers of Central or State Government;
- iv) Principal/Head-Master of the recognized college/institution where the candidate studied last;
- v) Post-Master