

TELANGANA STATE PUBLIC SERVICE COMMISSION: HYDERABAD

ANM/MPHA(F) IN TELANGANA VAIDYA VIDHANA PARISHAD (HEALTH, MEDICAL & FAMILY WELFARE DEPARTMENT) NOTIFICATION NO.05/2018. Dated: 25/01/2018

BASIC INFORMATION DATA
(CHECK LIST)

(To be filled by the candidate)

TSPSC ID :

Ref ID :

HALL TICKET NO :

PHOTO OF THE CANDIDATE

DATE OF VERIFICATION :

Signature

01	Name of the Candidate (as per SSC Certificate)					
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 01/07/2018)	Years	Months	days		
		[][]	[][]	[][]		
07	Qualification (As on 25/01/2018)	As per Notification		Qualification	Date of acquiring qualification	Name of the Board /University
			a) Must have passed SSC or Equivalent Examination			
			b) Must have passed MPH (F) Training course, conducted by Government of AP / Telangana			
			Official use:			

08	Details of Registration with AP/TS Nursing Council	Registration Number	Date of Registration						
		Official use:							
09	Experience Details (for Service Weightage for Contract Employee)	Name of the Hospital	From		To				
		Official use:							
10	Community (integrated Community Certificate Issued by Thasildar for SC/ST/BC from Telangana State Govt)	OC	SC	ST	BC				
					A	B	C	D	E
		Official use:							
11	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:							
12	Certificates for Ex-Servicemen Reservation	Yes		No					
		Official use:							

13	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>		Whether relevant Certificate Produced YES NO <input type="checkbox"/> <input type="checkbox"/>			
		(No. of years claimed for relaxation) Official use:					
14	PH –Category (Certificate to be submitted)	VH		HH		OH	
		Percentage of Disability					
15	For the Determination of Native District Indicate the evidence (Original Study Certificate to be produced) OR Residence certificate for 7 yrs. Prior to SSC if private Study.	As per Notification erstwhile 10 Districts, T.S					
		Class	Year		District		State
		IV					
		V					
		VI					
		VII					
		VIII					
		IX					
		X					
16	As per Notification (erstwhile 10 Districts, T.S) District you belongs to						
17	Present Employment details (Government Employees should submit NOC)						
		Official use:					
18	Other Certificates (If any)	1.					
		2.					

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.

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Address.

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.....
.....

Mobile No.....

Place:

Date:

Signature of the candidate.

OFFICIAL USE

The Candidate Admitted/Rejected with the following reason.

A.S.O SECTION OFFICER

ASST. SECRETARY

DEPUTY SECRETARY

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
Name	<input type="text"/>	<input type="text"/>
H.No./Plot No.	<input type="text"/>	<input type="text"/>
Name of Apts./ Complex	<input type="text"/>	<input type="text"/>
Street & Road	<input type="text"/>	<input type="text"/>
Village	<input type="text"/>	<input type="text"/>
Mandal/Taluk	<input type="text"/>	<input type="text"/>
Town/City	<input type="text"/>	<input type="text"/>
District	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Pin Code	<input type="text"/>	<input type="text"/>

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