



ATTESTATION FORM

(THIS FORM IS TO BE SUBMITTED IN TRIPLICATE)

Please Paste
Passport size
Photograph

WARNING :

1. The furnishing of false information of suppression of any factual information in the Attestation Form would be disqualification and is likely to render the candidate unfit for employment under the Government.
2. If detained, converted, debarred etc. subsequent to the completion and submission of this form, the details be communicated immediately to the Kendriya Vidyalaya Sangathan the authority to whom the attestation form has been sent to be a suppression of factual information.
3. If the fact that false information has been furnished or that there has been suppression of any factual information in the Attestation Form comes to notice at any time during the service of a person, his service would be liable to be terminated.

1.	Name in full (In capitals) with aliases, if any. (please indicate if you have added or dropped at any stage any part of your name or surname).	SURNAME	NAME
2.	Present address in full (i.e) Village/ Thana and District or House Number, Lane/ Street/ Road and Town.)		
3.	(a) Home address in full (i.e) village, Thana and District or House Number, Lane/ Street/ Road and Town).		
	(b) If originally a resident of Pakistan, the address in that country and the date of migration to Indian Union.		
4.	Particulars of places (with periods of residence where you have resided for more than one year at a time during the preceding five years)		
	From	To	Residential Address in Full (i.e Village, Thana & District or House No. Lane/Street/Road and Town)
			Name of the District Hqrs. of the place mentioned in the preceding Column.

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5	Father's Name in full with aliases, if any	
	(a) Present postal address (if dead, give last address)	
	(b) Permanent home address	
	(c) Profession	
	(d) If in service, give designation and official address	
6.	Nationality	
	(a) Father	
	(b) Mother	
	(c) Husband/ Wife	
	(d) Candidate	
	(e) Place of birth of husband/ Wife	
7.	(a) Exact date of birth	
	(b) Present age	
	(c) Age at Matriculation	
8.	(a) Place of birth, District and State in which situated	
	(b) District and State to which you belong	
9.	(a) Your religion	
	(b) Are you a member of Scheduled Caste/ Scheduled Tribe? 'Yes' or 'No' and if the answer is 'Yes' state the name thereof.	

10. Educational qualification showing places of education with years in schools and college since 15th year of age.

Name of School/ College with full address	Date of entering	Date of leaving	Examination passed

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11. (A) If you have at any time been employed, give details

Designation of post held and Description of work	Period		Full Address of the Office, Firm or Institution	Full reasons for leaving the previous service
	From	To		

(B) If the previous employment was under the Govt. of India/ State Govt./an undertaking onward or controlled by the Govt. of India/ a State Govt./ and autonomous body/ University/ Local body. If you had left service on giving a month's notice under the Central Civil Services (Temporary Service) Rule, 1965 or any similar corresponding rules were any disciplinary proceeding framed against you. You had been called upon to explain your conduct in any matter in response to notice of termination of Service or at a subsequent date before your services actually terminated?

12.	Have you ever been arrested, prosecuted, kept under detention, or bound down/fined, convicted by a court of law for any offence?	
	Is any case pending against you in any court of law at the time of filling up this attestation form?	
	If the answer is 'Yes' full particulars of the case, detention, fine, conviction, sentence etc. should be given.	
	Have you ever been debarred from any examination or retested by any University or any other Educational Authority/ Selection or you have ever been debarred/disqualified by any Public Service Commission from appearing at its examination/selection?	

12(B) If the answer to any of the above mentioned question is Yes, then give full particulars of the case/arrest/detention/conviction/sentence/punishment etc. and or/the nature of the case pending in Court/University/Educational Authority etc. at the time of filling up this form.

NOTE : PLEASE ALSO SEE THE WARNING AT THE TOP OF THIS ATTESTATION
Specific answers to each of the questions as at 12 above should be given in 'Yes' or 'No' as the case may be.

13.	Name of two responsible persons of your locality or two references to whom you are known.	
		1.
		2.

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might impair my fitness for employment under Government.

Signature of candidate _____
Date _____
Place _____

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IDENTITY CERTIFICATE

(TO BE SUBMITTED IN DUPLICATE FROM TWO GAZETTED OFFICERS)

Certificate to be signed by any one of the following :

- (i) Gazetted Officers of Central or State Government.
- (ii) Members of Parliament or State Legislature.
- (iii) Non-Gazetted Sub-Divisional Magistrates/ Officers.
- (iv) Tehsildars or Naib/ Dy. Tehsildars authorised to exercise magisterial powers.

Certified that I have known Shri/Smt./Kumar _____
son/ daughter of Shri _____ for the last
_____ years _____ months and that to the best of my knowledge and belief
the particulars furnished by him/her are correct.

Place _____

Date _____

Signature _____

Designation or Status and
Address _____

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Certificate to be signed by any one of the following :

- (i) Gazetted Officers of Central or State Government.
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Certified that I have known Shri/Smt./Kumar _____
son/ daughter of Shri _____ for the last
_____ years _____ months and that to the best of my knowledge and belief
the particulars furnished by him/her are correct.

Place _____

Date _____

Signature _____

Designation or Status and
Address _____



MEDICAL CERTIFICATE

Please Paste
Passport Size
Photograph

Name of candidate for appointment _____
 (In block letters)

Caste or Race _____

Residence _____

Father's Name and Address _____

Date of Birth by Christian era _____

Exact height by measurement _____

Personal marks of identification _____

Signature of Candidate

I, do hereby certify that I have examined Shri/Smt./Kumari _____
 a candidate for employment in the Kendriya Vidyalaya _____
 and cannot discover that he/she has any disease communicable or otherwise
 constitutional ailment or bodily infirmity, except _____

I do not consider this a disqualification for employment in the Vidyalaya
 _____ His/her age is, according to his/her own statement,
 _____ years, and he/she appears about _____ years.

Left hand thumb and finger impression of the candidate.

Signature of the Candidate _____

Taken before _____

Name of the Officer _____

Designation of Officer (This Officer should be Civil Surgeon or Medical Officer of equal rank)

**SIGNATURE OF OFFICER
(CIVIL SURGEON / MEDICAL OFFICER)
WITH SEAL AND DATE**

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The Deputy Commissioner
Kendriya Vidyalaya Sangathan
Regional Office, Govt. Hospital Road,
Gandhi Nagar, Jammu

Subject: - Acceptance for the offer of appointment for the post

Sir,

With reference to your Memorandum No. F.
Dated, I hereby accept the offer of appointment as per the
terms and conditions contained therein for the post of with place
of posting in Kendriya Vidyalaya

Yours faithfully,

Signature with Name

Dated:-

Place:-

Note: Scanned copy may be sent through email only on ID
kvsjammuadm@gmail.com. Please don't send through post.

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DECLARATION

1. Shri/Smt./Kumar/_____ declare as under :

- (a) That I am unmarried/ a widower/ a widow.
- (b) That I am married and have only one wife living.
- (c) That I am married and have more than one wife living. Application for grant of exemption is enclosed.
- (d) That I am married and that during the life time of my spouse, I have contracted another marriage. Application for grant of exemption is enclosed.
- (e) That I am married and my husband has no other living wife, to the best of my knowledge.
- (f) That I have contracted a marriage with a person who has already one wife or more living. Application for grant of exemption is enclosed.

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.

Date _____

Signature _____

OATH TO BE TAKEN BEFORE THE PRINCIPAL OF THE VIDYALAYA

I, _____ do swear/
solemnly affirm that I will be faithful and bear true allegiance to India and to the Constitution of India as by law established and that I will carry the duties of my Office loyally, honestly and with impartiality.

So, help me God.

Place : _____

Date _____

Signature _____

Designation _____