ATTESTATION FORM

WARNING: 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 GOVT.

Affix signed passport size (5 cm x 7 cm copy of recent photograph)

- If detained, arrested, prosecuted, bound down, fined, convicted, debarred, acquitted, etc. Subsequent to the completion and submission of this form,, the details of communicated immediately to the authorities to whom the attestation form has been sent earlier, falling which it will be deemed to be a suppression of factual information.
- 3. If the fact that false information has been furnished in the Attestation Form ,comes to notice at any time during the service of a person, his services would be liable to be terminated.

1.	Name in full (in block capitals	
	letters) with aliases, if any	
	(Place indicate if you have	
	added or dropped in any	
	stage any part of your name	
	of surname.	
2.	Present address in full (i.e.	
	Village, Thana and Distt. Or	
	House No., Lane / Street	
	Road and Town)	
3.	(a) Home address in full (i.e.	
	Vill., Thana and Distt. Or	
	House No., Lane / Street /	
	Road and Town have of	
	Distt. Hqr.	
	(b) If originally a resident of	
	Pakistan / Bangladesh	
	(erstwhile East Pakistan),	
	the address in that country	
	and the date of migration	
	to Indian Union.	

4. Particulars of places (with period of residence) where you have resided for more than one year at a time during the preceding five years. In case of stay abroad (including Pakistan), particulars of all places where you have resided for more than one year after attaining the age of 21 years should be given.

From	-	То		Residential address in full (i.e. Village, Thana & District or House No. & Street / Road and Town		Name of the Hqtr., of the mentioned i preceding c	place n the
5.	Name (in full aliases, if an	y)	Nationality (by Birth & or by domicile)	Place of birth	Occupation (if employed give designation & official address.)	Present postal address (if dead, give last Address)	Permanent Home Address
i) ii) iii) iv) v)		sband	n Full)				
. ,	5. (a) Information to be furnished with regard to sons and / or daughters in case they are studying / living in a foreign country.						
Name Nationality which (By Birth and / Or by Domicile)		studying /	Country in which studying / living with Full Address		Date from which Studying / Living in the country mentioned in the previous column		
6.	Nationality			:			

7.

(a) (b) Date of Birth

Present Age

	(c)	Age at matriculation :
8.	(a)	Place of Birth, Distt., and :
		State in which situated
	(b)	Distt. And State to which :
		You belonged
	(c)	Distt. And State to which :
		you Father originally belong
9.	(a)	Your religion :
	(b)	Are you a member of a SC/ST ? Answer
	(2)	Yes or No :

10. Educational qualification showing place of education with years in schools and colleges since 15th years of age.

Name of School/College with Full Address	Date of Entering	Date of leaving	Examination passed

11. (a) Are you holding or have any time held an appointment under the Central Govt. or State Govt. or a quasi-Govt. body or an Autonomous body or a public undertaking, or a private firm or institution? If so, give full particulars with dates of employment up to date

Period		Designation,	Full name /	Reasons for
From	То	emoluments &	address of	leaving
		Nature of		previous
		employment		service

(b) If the previous employment was under the Govt. of India / State Govt./an undertaking owned or Controlled by the Govt. of India or a State Govt. an Autonomous Body / University / Local Body, if you had left service on giving one month's notice under Rule 5 of the Central Service (temporary service) Rules 1965 or any similar corresponding rules or where any disciplinary proceeding framed against you, or had you been called upon to explain you conduct in any matter at the time you give notice of termination of service or at a subsequent date (s) before your service.

12.	(a)	Have you ever been arrested?	Yes/No
	(b)	Have you ever been prosecuted?	Yes/No
	(c)	Have you ever been kept under detention?	Yes/No
	(d)	Have you ever been bound down?	Yes/No
	(e)	Have you ever been fined by a Court of Law?	Yes/No
	(f)	Have you ever been convicted by a Court of law	
		for any offence?	Yes/No
	(g)	Gave you ever been debarred from any Examination or restricted by any University or any other educational authority / institution?	Yes/No
	(h)	Have you ever been debarred / disqualified by any Public Service Commission / Staff Selection Commission for any of its examination / selection?	Yes/No
	(i)	Is any case pending against you in any Court of Law at the time of filling up this Attestation Form?	Yes/No
	(j)	Is any case pending against you in any University or any other educational authority/institution at the	Yes/No

time of filling up this Attestation Form?

- (k) Whether discharged / expelled / withdrawn Yes/No From any training / institution under the Government or otherwise ?
- (ii) If the answer to any of the above mentioned question is "Yes" (give full particulars of the case / arrest / detention / fine / conviction / 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 striking out "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	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 the Candidate

Place:

Date:

IDENTITY CERTIFICATE

(Certificate to be signed by any of the following)

- i. Gazetted Officer of Central Government or State Govt.
- ii. Members of Parliament or State Legislative belonging to the constituency where the candidate or his parent / guardians ordinarily resident.
- iii. Sub-Divisional Magistrate /Officers.
- iv. Tehsildars or Naib Deputy Tehsildars authorized to exercise magisterial power.
- v. Principal / Headmaster of the recognized School/College/Institution where the candidate studied last.
- vi. Post Masters
- vii. Block Development Officer
- viii. Panchayat Inspectors.

Certified that I have known	Shri / Smt./Kum	
	Son / Daughter	of Shri
for the last _	Years	months
and that to the best of my knowledge an	d belief the particulars furn	ished by him / her are
correct.		
	Sign	nature
	•	Status & Address
Place:		
Date :		

TO BE FILLED BY OFFICE

- i) Name, Designation and Full Address of the appointment authority
- ii) Post for which the candidate is being considered.

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI DIRECTORATE OF EDUCATION: INCLUSIVE EDUCATION BRANCH AMRITA SHERGIL SCHOOL BUILDING LAJPAT NAGAR-IV, NEW DELHI-110024

FORM FOR ACCEPTANCE OF OFFER OF APPOINTMENT

1	hereby a	ccept the a	all terms	& co	nditio	ns to	the post of Reso	urce
Cent	er Coordinator (Post Code	- 03/24)	offered	to	me	vide	Memorandum	No.
	da	ted	I hereb	y sub	mit m	y parti	cular as under:-	
1.	Father's Name							
2.	Husband's Name							
3.	Date of Birth	(in figure) (in words)					Affix recent Pass	•
4.	Religion						Signature	
5.	Whether belong to SC/ST/ OBC/PH/ Ex-Servicemen etc.							

6. Academic/Professional Qualification from 10th onwards:-

S. No.	Name of Course/ Degree etc.	Name of Board/ University	Subject	Division	% age	Year of Passing

8. De	etails of Post(s) held previo	usly, if any	y:-		
	Name of the post	Date of	ioining	Date of Leaving	Name of the Employer(s)
	rume of the post	Date of	<u> </u>	Dute of Leaving	radine of the Employer(3)
	Present Address				
	Present Address				
9.	Phone No. E-mail				
	Permanent Address				
10.					
	Phone No. If employed at present,	the date			
11.	when he/she will be				
	from the post.				
12.	Any other information				
			DECLA	<u>RATION</u>	
	emnly declare that the info belief and nothing has bee	_		ve is true and corre	ct to the best of my knowledge
Data	d ·				Signature:
Date	u .				Name: (In block letters)

7.

If Displaced person, Place from

where migrated

UNDERTAKING

I give an und debarred by any Board/University/Commission in any examples or detected incorrect, my candidature/selectic cancelled/terminated automatically without any notice against me accordingly.	mination. If at any stage it is found on/appointment is liable to be
	Signature:
	Name: (in block letters)
	Roll No. Resource Center Coordinator

Post code : 03/24

DECLARATION

I	hereby declare as under:-	
(a)	That I am Unmarried/Widower/Widow.	
(b)	That I am married and have only one spouse living.	
(c)	That I have entered into or contracted a marriage with person ha	aving a spouse living.
	Application for grant of exemption is enclosed.	
(d)	That I have entered into and contracted a marriage with another	er person during the lifetime
	of my spouse. Application for grant of exemption is enclosed.	
	nnly affirm that the above declaration is true-and I understan tion being found to be incorrect/false after my appointment. I shervice.	
Dated :		Signature: Name: (In block letters)

OATH OF ALLEGIANCE FOR INDIAN NATIONALS

I	do swear/solemnly affirm and declare
that I will be faithful and bear true allegiance to Inc	lia and to the Constitution of India, as by
law established, that I will uphold the sovereignty o	f India and that I will carry out the duties
of my office loyalty, honestly and with impartially.	
	o: .
Dated:	Signature:
	Name: (In block letters)

UNDERTAKING/FORM

Self declaration for getting services from Government Departments/Loca Bodies/Autonomous Institutions under GNCT of Delhi.
I son/daughter of Sh
Age (years) resident of
Do hereby affirm and declare:-
1. That the certificates/documents produced by me and the copies of the same deposited by me with the application form are genuine and are issued by the recognized Institute/Board/University, and if the same are proved to be fake/false during the course or verification of certificates/documents by the DSSSB/Directorate of Education as the case may be and subsequently by the employer, my service shall be liable to be terminated without any notice in addition to penal action as warranted by the appropriate authority. 2. That the information given to the Department in the Acceptance form of Offer or Appointment and at any other stage of the appointment in the enclosed documents/Performa is true and correct to the best of my knowledge and belief and nothing material has been concealed therein. I am well aware that concealment of facts and giving false information is a punishable offence and in case I am guilty of giving false information or concealment of facts herein, I will be liable to be punished with imprisonment and/or fine as per the relevant provisions of law. I also undertake that the benefits availed by me by furnishing such false information or concealment of facts shall be
 Iiable to be summarily withdrawn. That I bear good moral Character and the same may be got verified from any Appropriate Authority.
Signature
Full Name in Capital Letters
Place
Date

UNDERTAKING

(For OBC candidates only)

Ison/daughter	of Shri
resident of village/town/city	
	at I belong to the
reservation in service/appointment in Denotification No.28 (93)/91-92/scst/p&s/438. It is also declared that I do not belong to Column 3 of the Schedule in Department of 36012/22/93-Estt. (SCT date 8/9/1993, which	rd class by the Govt. of Delhi for the purpose of elhi Government service in accordance with 5-95 dated 20.01.1995 of Government of Delhi. o person/section (Creamy Layer) mentioned in Personal and Training office Memorandum No. h is modified vide Department of Personnel and 33/3/2004 Estt.(Res) dated 9/3/2004 and
parents/guardian is within the prescribed li (year to be checked) I understand	status/annual income for creamy layer of my imits as on financial year ending on March 31, that my appointment/offer will stand cancelled ubmitted by me is found not genuine/invalid.
OBC certificate no NCL certificate no	
Place: Dated:	Signature: Name: (In block letters)

EMPLOYEE INFORMATION FOR POSTING ON THE POST OF RESOURCE CENTER COORDINATOR POST CODE: 03/24

1.	First Name	:	
2.	Middle Name	:	
3.	Last Name	:	
4.	Date of Birth	:	
5.	Father/Husband Name	:	
6.	Marital Status	<u>:</u>	
7.	Gender (Male/Female)	:	
8.	Category (SC/ST/OBC/PH/Gen.)	:	
9.	Residential Address	:	
10.	Nearest Govt. School from Residence (For calculation of Distance for allotment of school	:	
11.	. Contact No.	:	
12.	. CRR No. of RCI and specialisat	ion:	
Date	d:		
		SIGNATURE OF	CANDIDATE
		NAME:	(in block letters)

SELF DECLARATION FORM

I	, S/	′o, D/o, W/o	do hereby
undertake that I	am the same person POST CODE: 03/24) a	n who applied for the and whose name, pl	he post of RESOURCE CENTER hotograph, signature and other ince on offer of appointment,
	er educational certificat		mee on oner or appointment,
			his/her running handwriting in
the box given bel			,
			SIGNATURE OF CANDIDATE
			NAME:(in block letters)

Thumb impression	
LTI	RTI

UNDERTAKING

It is hereby undertaken that the information furnished by me are true and correct and the OBC Certificate is as per provisions contained in DSSSB advertisement number 04/20 and in the event of being found false or detected incorrect or incomplete at any stage or any ineligibility being detected after the appointment, my candidature/appointment is liable to be cancelled/terminated automatically without any notice and action can be taken against me by the department as per Rules.

Signature
Name of candidate
Roll No
Post Code - 03/24

Resource Center Coordinator