



भारत सरकार

कलावती सरन बाल अस्पताल/Kalawati Saran Children's
Hospital बंगला साहिब मार्ग, नई दिल्ली/Bangla Sahib Marg,
New Delhi-110001



No. KSCH/RR Cell/159/17-18/ 1953

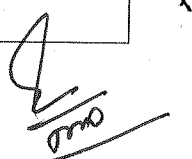
Dated: 09/05/18

NOTICE FOR JOINING FOR NURSING OFFICER IN KSCH

On the basis of Document Verification Session held on 20.4.2018 of the following candidates for the post of Nursing Officer. The names of the qualified candidates mentioned below are hereby directed to download the joining forms attached with this notice and submit two sets in original within stipulated time mentioned in the Offer of Appointment Letter of each official regarding their joining to the said post in KSCH.

S. No	Roll. No	Name of the candidates Father's/Husband's Name & Address	Category	Remarks
1	212718	Ms. Deepika Kumari Meena D/O: Sh. Haricharan Meena	ST	Qualified
2	213954	Sh. Ralph Raja D S/O: Durai Raj M	UR	ABSENT
3	222523	Ms. Ponni M D/O: K.Mohanan	UR	Qualified
4	211037	Sh. Visakh. V S/O: Vijayakumaran Nair	UR	Qualified
5	211741	Sh. Manoj Kumar Sharma S/O: Suresh Chand Sharma	UR	ABSENT
6	223917	Ms. Sumi Rajan D/O: T Y Rajan	UR	Qualified
7	217952	Sh. Bhagawan Lal Dhaker S/O: Prabhu Lal Dhaker	OBC	Qualified
8	225004	Sh. Kalpesh Vaishna V S/O: Kandas Vaishnav	OBC	Qualified
9	227903	Sh. Ramesh Kumar S/O: Pratap Singh	OBC	Qualified
10	223080	Sh. Swaroop Bhargav S/o Shankar Lal Bhargav	OBC	Qualified
11	200676	Ms Ahila. C D/o Chandrasekaran	SC	Qualified
12	206525	Ms. Sapna D/o Lakhiram	SC	Qualified

This issues with the approval of the Competent Authority.


(Dr. Sandip Ray)
Medical Officer

Encs: As above.

भारत सरकार

कलावती सरन बाल चिकित्सालय: नई दिल्ली

क० सं० बा० चि०—150

KSCH—150

प्रथम नियुक्ति/स्थानांतरण की कार्यग्रहण (जोड़नहंग) रिपोर्ट
JOINING REPORT OF FIRST APPOINTMENT/TRANSFER

में कार्यालय के दिनांक

के प्रापन/पृष्ठांकन संख्या

के अन्तर्गत

नाम दोपहर से पहले/दोपहर बाद

कार्यग्रहण कर रहा हूँ।

With reference to the Memorandum/Endorsement No. _____ dated the _____

I beg to report for duty on the forenoon/afternoon of the _____

में अपनी नियुक्ति से संबंधित अपेक्षित सूचना का विवरण दे रहा हूँ।

I give detailed information required in connection with my appointment :—

1. नाम

Name in Full

2. समुदाय

Community

3. स्थायी पता

Permanent Address

4. वर्तमान पता

Present Address

5. शैक्षणिक योग्यता

Educational Qualification

6. जन्म तिथि

Date of Birth

7. पिता/पति का नाम और पता

Father's/Husband's Name and Address

8. पिछली सरकारी नौकरी में नियुक्ति का विवरण

Particulars of previous appointment under Government :—

कार्यालय जहाँ से स्थानांतरण (ट्रांसफर) हो रहा है

(a) Office from which transferred

पद पर कार्यरत (क्या स्थायी या अस्थायी है)

(b) Post held (whether permanent or Temp)

वेतन और वेतनमान

(c) Pay and Scale of pay

पिछले कार्यालय में नियुक्ति की तिथि

(d) Date of appt. in the previous office

पिछले पद से त्यागपत्र दिया या नहीं

(e) Whether resigned from previous post or not

9. वर्तमान नियुक्ति का विवरण

Particulars of the Present appointment :

जिस पद पर नियुक्ति हुई है

(a) Post to which appointed

वेतन और वेतनमान

(b) Pay and Scale of pay

आवेदक के हस्ताक्षर
(Signature of applicant)

प्रतिहस्ताक्षर

Countersignature

आचार्य/मिथु/विज्ञान/उप चिकित्सा अधीक्षक/प्रशासनिक अधिकारी/नर्सिंग अधीक्षक/सं. श्रम पर्व

POP/DMS/AO/NS/ALS

प्रति हस्ताक्षर

Countersignature

प्रधानाचार्य

PRINCIPAL

KALAWATI SARAN CHILDREN'S HOSPITAL: NEW DELHI

(FORM TO BE FILLED BY GOVT. EMPLOYEES ON FIRST EMPLOYMENT)

ATTESTATION FORM

1. 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)

2. If detained, arrested, prosecuted, bond 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 to the 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, Thane 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	To	Residential address in full (i.e. Village, Thana & District or House No. & Street / Road and Town	Name of the District Hqtr., of the place mentioned in the preceding column

5.	Name (in full & aliases, if any)	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) Father (Name in Full) ii) Mother iii) Wife/Husband iv) Brother(s) v) Sister(s)						

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)	Place of Birth	Country in which studying / studying / living with Full Address	Date from which Studying / Living in the country mentioned in the previous column

6. Nationality :

7. (a) Date of Birth :
 (b) Present Age :

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(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 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, emoluments & Nature of employment	Full name / address of	Reasons for leaving previous service
From	To			

(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.

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 :

Large S ABG

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 and belief the particulars furnished by him / her are
correct.

Signature
Designation or 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.

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CERTIFICATE OF CHARACTER

ANNEXURE - IV

Certified that I have known Mr./Ms. _____
Son/Daughter/ of Mr./Mrs. _____ for the
last _____ Years _____ months and that to the best of my knowledge and belief
he/she bears reputable character and has no antecedents which render him unsuitable for Government
employment.

Mr./Ms. _____ is not related to me.

Place

Signature (with stamp)

Date

Designation

CERTIFICATE OF CHARACTER

Certified that I have known Mr./Ms. _____
Son/Daughter/ of Mr./Mrs. _____ for the
last _____ Years _____ months and that to the best of my knowledge and belief
he/she bears reputable character and has no antecedents which render him unsuitable for Government
employment.

Mr./Ms. _____ is not related to me.

Place

Signature (with stamp)

Date

Designation

Note: The attestation below is not necessary in respect of appointment to Class IV posts.

I am satisfied about the reliability of the person who has given the above certificate of character.

Place

Signature (with stamp)

Date

Designation
District Magistrate or Sub-Divisional Magistrate
or their Superior Officer

KALAWATI SARAN CHILDREN'S HOSPITAL, NEW DELHI
(FORM TO BE FILLED BY GOVT. EMPLOYEES ON FIRST EMPLOYMENT)

DECLARATION

I, Sh./Smt/kum/_____ declare as under:

1. That I am unmarried /a widower/a widow.
2. That I am married and have only a wife living.
3. That I am married and my husband has no other living wife to the best of my knowledge.
4. That I am married and have more than one wife living. Application for grant of exemption is enclosed.
5. That I am married to a person who has already one wife or more, living. Application for grant of exemption is enclosed.

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 dismissal from service.

Signature _____

Dated: _____

Designation _____

Note: Strike out whichever is not applicable.

OATH / AFFIRMATION

I _____ do swear/solemnly affirm that I will be faithful and bear true allegiance to the India and the Constitution of India as by law established, the I will uphold the sovereignty and integrity if India and that I will carry out the duties of my office loyalty, honesty and with impartiality.

“(So help me God)”

Signature _____

Dated: _____

Designation: _____

The Oath allegiance has been administered by me to:

Sh./Smt/Kum _____

Dated: _____

(Admn. Officer)