

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		
H.No./Plot No.		
Name of Apts./ Complex		
Street & Road		
Village		
Mandal/Taluk		
Town/City		
District		
State		
Pin Code		

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:

<p>Photograph of the candidate attested by Gazetted Officer / MLA / other with seal Competent Authority</p>

CERTIFICATE OF PHYSICAL FITNESS

Name, Rank and Medical Qualifications of
an Officer Granting the Certificate with
Register Number.

I do hereby certify that I have examined (full name _____)
a candidate for employment under the Telangana State Power Generation Corporation Limited, in the
O&M service as _____ and cannot discover that he has any disease,
constitutional affection or bodily infirmity except that his weight is in excess of/below the standard
prescribed, or except I do/do not consider this a disqualification for the employment he seeks.

I do further certify that in my opinion his general physical condition is such as to enable him
to perform efficiently the active duties of executive service.

I also certify that he has marks of Small Pox/Vaccination.

Chest Measurement in centimeters in full inspiration/on full expiration/difference (Expansion).

Weight (in kgs)	Height	Meters	Centimeters.
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His Visional
Is Normal

Hypermetropic (_____)

(Here enter the degree of defect and the strength of correction of glasses).

Myopic (_____)

(Here enter the degree of defect and the strength of correction of glasses).

Astigmatic (simple or mixed)(_____)

(Here enter the degree of defect and the strength of correction of glasses).

Hearing is normal/defective (Much or slight).

Urine-Does chemical examination show(1) albumen, (2) Sugar, if so state specific gravity.

Personal Marks (atleast two should be mentioned)

i)

ii)

Signature

Rank/Qualification:

Designation:

Station:

Date:

UNDERTAKING

[To be engrossed on a non-judicial stamp paper worth of Rs 100/- duly notarized and to be submitted at the time of joining duty on absorption]

I,.....S/o. /W/o. /D/o.....

DOB R/o.....

provisionally considered for absorption as Artisan Gr.I/Artisan Gr.II/Artisan Gr.III/Artisan Gr.IV

vide Memo No. dated in the Office of the

..... do hereby solemnly affirm and state on oath that any of the

information furnished by me in my Bio-Data Form for Absorption in TSGENCO found to be

false or the relevant Certificate relating to my education qualifications etc., or Community

Certificate or EPF Account Number found "Fake/Bogus" at a later date or any "adverse

remarks" are reported against me at the time of "antecedents verification", the Management

is having liberty and full powers as conferred under rules/regulations to terminate my

services forth with without any notice and without assigning any reasons thereof and further I

shall also be liable for criminal prosecution as deemed fit.

2. I hereby undertake that my conditions of service will be governed by the rules and regulations specifically as framed for my absorption as amended by TSGENCO from time to time. The Tripartite Agreements entered into among the erstwhile APSEB, Government of AP and Employees Associations are not applicable to me and I shall at no stage be entitled to claim any right whatsoever arising out of the said Tripartite Agreements.

3. I hereby undertake that I will not claim any benefits whatsoever for the service rendered by me on outsourcing basis in TSGENCO prior to my absorption, since I have already been paid all the benefits such as Earned Leave, Weekly Off, Retrenchment (Gratuity) Compensation etc.

Contd.

4. I undertake to be governed by the EPF & MP Act,1952 **and other allied Acts, upon my absorption in TSGENCO. I also undertake that I am not entitled to claim any benefits under the Revised Pension Rules, 1980. I shall be governed by a set of new Medical Rules which shall be formulated separately. Till such time, I shall be governed by the ESIC Act,1948 or GIS Policy, as applicable.**

5. I undertake that my absorption as Artisan Grade-I/Artisan Grade-II/Artisan Grade-III/Artisan Grade-IV is subject to out-come of the WP(PIL) No.149 of 2017 and Writ Petition No.20544 of 2017 filed by certain candidates and pending before the Hon'ble High Court of Judicature at Hyderabad.

Place:

Name

Date:

(Full Name as indicated on Bio-Data)

Red. OPIS ID No.

(Duly Notarised)