MEDICAL REPORT

| | | | Signature of Signed before | candidatere me |
|--------|------------------------|--|----------------------------|--|
| | | | _ | al Officer |
| Name | · Shri/S | Smt /Miss | | S/o, W/o, D/o Shri |
| | | | | Age |
| I. | What What What | is the candidate's height? is the candidate's weight? is the chest girth on full inspirate is chest girth on complete expirate is girth of relaxed abdomen? | | |
| II. | | the result of you examination of eart and lungs. | of | |
| III. | | the result of your examination of ive system, abdominal and genit | | |
| IV. | Has h | e/she Hernia, Hemorrhoids or | Varicose Veir | as? |
| V. | vision | the condition of his/her refracts a normal, if not, is it capable of the ction by lenses to 6/6 | | |
| VI. | (a) | State the condition of his/her h | nearing? | |
| | (b) | It there any history of past O | torrhoea? | |
| VII. | State the | he result of your examination of | of his/her urin | e ? |
| | React Appea Does | fic gravity ion arance it contain albumen ? it contain Sugar ? | | |
| VIII. | | e/she had Syphilis or other real diseases ? | | |
| IX. | What | illness has he/she suffered from | n. | |
| X. | Has h | e/she been vaccinated satisfact | orily? | |
| XI. | State | you opinion of his/her present | | |
| | (i) He | ealth and (ii) Constitution. | | |
| XII. | Shri/S | e whole do you consider Smt./Missy part of India as well as other | | is a good and likely to stand the climate of the same age. |
| XIII. | Identi | fication Mark. | | |
| Date : | | | | Signature with Seal of Chief Medical & Health Officer |
| Place | | | | Address |

SCHEDULE-I (See Regulation 5(4)(ii)

DECLARATION OF MARITAL STATUS

| | declare as under |
|----------------------|--|
| (i) (ii) (iii) | That I am unmarried/a widower/widow. That I am married and have only one spouse living. That I have entered into or contracted a marriage with a person having a spouse living. I may be granted exemption on the basis of ground below. Application for grant of exemption is enclosed. |
| Ground: | |
| • | affirm that the above declaration is true and I understand that in the event of the ing found to be incorrect after my appointment, I shall be liable to be dismissed |
| Date : | Signature: Name in full: Designation: |

SCHEDULE II (See Regulation 19)

Declaration of Fidelity and Secrecy

| | Place : Date : |
|--|---|
| I | ties required of me as officer or |
| I further declare that I will not divulge or allow to be divulged any information relating to the affairs of the said Bank or dealing with the said Bank and nor will I allow any such persor documents or electronic records belonging to or in posses business of the said Bank or the business of any person having | to the affairs of any person having any son to inspect or have access to any books ssion of the said Bank and relating to the |
| Signed before me | |
| | Signature: Name in full: Designation: |
| Signature: Name in Full: Designation : | |

SCHEDULE-III

(See Regulation 73)

Declaration of Domicile

| | Place : Date : |
|----|---|
| 1. | The undersigned having been appointed in the service of the Rajasthan Marudhara Gramin Bank hereby declare (Place) in |
| 2. | *The above is my place of birth |
| | Or * The above is not my place of birth. My place of birth is(Place) in |
| | |

Signature
Name in full
Designation and
Nature of appointment
Date of appointment

 \ast Strike out whichever is not applicable.

Declaration letter

The Chairman, Rajasthan Marudhara Gramin Bank, Head Office, JODHPUR.

- 1. I hereby declare that I am not an undischarged bankrupt. I further declare that I have not at any time been adjusted insolvent or suspended payment or compounded with my creditors or convicted by a criminal court of any offence involving moral turpitude.
- 2. I am prepared to serve at any Branch / Office of the Bank in India.
- 3. I have read and understood the contents of the enclosed memorandum containing rules of conduct which I have also assigned in token thereof.

| Place : | |
|---------|-----------------------|
| Date : | Signature: |
| | Name in full |
| | Designation and |
| | Nature of appointment |
| | Date of appointment |

घोषणा पत्र

| श्रीमान् अध्यक्ष महोदय, | |
|---|--|
| राजस्थान मरूधरा ग्रामीण बैंक, | |
| प्रधान कार्यालय, | |
| जोधपुर (राज.) | |
| | |
| 并 | एतद् द्वारा घोषणा करता/करती हूँ कि मैं |
| वर्तमान समय में सरकारी/अर्द्ध सरकारी/ स्वायत्तः | गाषी संस्थान में कही भी लाभ के पद के पर |
| कार्यरत नहीं हूँ। | |
| अथवा | |
| 肖 | एतद् द्वारा घोषणा करता/करती हूँ कि मैं |
| वर्तमान में | (सरकारी / अर्द्ध सरकारी / |
| स्वायत्तशाषी संस्थान का नाम) में | के पद पर कार्यरत हूँ। मैं आपको |
| आश्वस्त करता / करती हूं की मैं नियुक्ति के सम | ाय उक्त संस्थान से अपना कार्यमुक्ति प्रमाण |
| पत्र / आदेश (Relieving Order) प्रस्तुत कर दुंगा | / दुंगी । |
| | |
| | |
| हस्ताक्षर | |
| नाम : | |
| नियुक्ति पद : | |
| पुरा पता : | |
| | |
| स्थान : | |
| दिनांक : | |
| | |

REPORT OF REFREE

The Chairman, Rajasthan Marudhara Gramin Bank, Head Office, JODHPUR.

| I know Shri/Smt./KumS/o, W/ | o, D/o Shri |
|--|---------------------------------------|
| residing at and his/her family | personally sincefor |
| over five years. He / She comes from a respectable family ar | nd has no such antecedents, which may |
| render his / her unsuitable for the Bank's employment. He | She is honest dependable and his/her |
| character is good. Infact it is a matter of i | mmense pleasure to know that |
| Shri/Smt./Kumis being | g considered for appointment at the |
| post ofin Rajasthan Marudha | ra Gramin Bank for which he / she is |
| most suitable and will prove himself /herself an assets to | o the Bank. He/His/She/Her father / |
| husband owns landed property worth of Rs | which is situated at |
| | |
| is employed at | |
| and his worth is Rs | |
| He/She is not related to me. | |
| Place : | |
| Date : | (Signature of the refree) |
| A/c No. | Name |
| Name of Bank | Full Postal address |
| Signature Attested by Banker | Contact No.: |
| | |

Refree should be known to the Bank and his signature must be verified by the Banker with Seal.

REPORT OF REFREE

The Chairman, Rajasthan Marudhara Gramin Bank, Head Office, JODHPUR.

| I know Shri/Smt./KumS/o, W/ | o, D/o Shri | | | | | |
|--|--------------------------------------|--|--|--|--|--|
| residing at and his/her family | personally sincefor | | | | | |
| over five years. He / She comes from a respectable family and has no such antecedents, which may | | | | | | |
| render his / her unsuitable for the Bank's employment. He / She is honest dependable and his/her | | | | | | |
| character is good. Infact it is a matter of i | mmense pleasure to know that | | | | | |
| Shri/Smt./Kumis being co | nsidered for appointment at the post | | | | | |
| ofin Rajasthan Marudha | ra Gramin Bank for which he / she is | | | | | |
| most suitable and will prove himself /herself an assets to | the Bank. He/His/She/Her father / | | | | | |
| husband owns landed property worth of Rs | which is situated at | | | | | |
| | | | | | | |
| is employed at | | | | | | |
| and his worth is Rs | | | | | | |
| He/She is not related to me. | | | | | | |
| Place : | | | | | | |
| Date : | (Signature of the refree) | | | | | |
| A/c No. | Name | | | | | |
| Name of Bank | Full Postal address | | | | | |
| | | | | | | |
| Signature Attested by Banker | Contact No.: | | | | | |

Refree should be known to the Bank and his signature must be verified by the Banker with Seal.

RAJASTHAN MARUDHARA GRAMIN BANK, HEAD OFFICE, JODHPUR IDENTITY SLIP

| Addr | ess (Postal) : | | | | | | Affix Passport | | |
|---|---|----------------------|---|------------------------------------|--------------|------------------------|----------------|--|--|
| | (| | | | | | Size | | |
| | | | | | | | Photograph | | |
| Docie | | | | | | | | | |
| | gnation: | | | | | L | | | |
| | r's Name | | •••••• | | | | | | |
| | her Gen./OBC/S.C./S.T. /E | | | | | | | | |
| | her PWD/Ex Serviceman | | : | | | | | | |
| | fication Mark | | | | | | | | |
| | Of Birth | | // | • | D/MIMI/YYYY) | | | | |
| | of Birth | | • | | | | | | |
| | of Joining | : | ••••• | ••••• | | | | | |
| | emic Qualification | | ••••• | | | • | | | |
| - | al Qualification (if any) | | • | | | | | | |
| Previo Gendo | ous experience (With detail | s): | : Male | Fema | | [ark ✔On] | * / | | |
| | ied Status | | : Unmarried | Marri | | ark √ Onl | • | | |
| | | | . Offinal Fleu | Maii | (IVI | ark v Om | y) | | |
| | nanent Address | | : Hindi | Engli | ish (M | ark ✔ Onl | (v) | | |
| Typin | ng Knowledge | | : Hindi | Engli | ish (M | ark ✔ Onl | (y) | | |
| Typin Email | ng Knowledge Address | | : | | | | • | | |
| Typin Email Conta | ng Knowledge Address Act No.: Candidate Mob.No | | : | | | | • | | |
| Typin Email Conta Detail | ng Knowledge Address | Age | : | Guardian | | | ··· | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | | : | Guardian | Mob.No | | Depender | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age | Relation with | Guardian | Mob.No | Income | Depender | | |
| Fypin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in | Relation with | Guardian Matrimonial Status | Mob.No | Income Per | Depender | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in | Relation with | Guardian Matrimonial Status | Mob.No | Income Per | Depender | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in | Relation with | Guardian Matrimonial Status | Mob.No | Income Per | Depender | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in | Relation with | Guardian Matrimonial Status | Mob.No | Income Per | Depender | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in | Relation with | Guardian Matrimonial Status | Mob.No | Income Per | Depender | | |
| Typin Email Conta Detail | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in | Relation with | Guardian Matrimonial Status | Mob.No | Income Per | Depender | | |
| Typin Email Conta Detail S.N. | ng Knowledge Address act No.: Candidate Mob.No ls of Family Members :- | Age (in years) | Relation with Candidate | Guardian Matrimonial Status Yes/No | Occupation | Income Per Month | Depender | | |
| Typin Email Conta Detail S.N. | ng Knowledge Address Act No.: Candidate Mob.No Is of Family Members :- Name | Age (in years) | Relation with Candidate | Guardian Matrimonial Status Yes/No | Occupation | Income Per Month | Depender | | |
| Typin Email Conta Detail S.N. | ng Knowledge Address Act No.: Candidate Mob.No Is of Family Members :- Name | Age (in years) | Relation with Candidate | Guardian Matrimonial Status Yes/No | Occupation | Income Per Month | | | |

UNDERTAKING

(FOR EX-SERVICEMAN)

I confirm that I am entitled to the benefits admissible to ex-servicemen in terms of the Ex-Servicemen (Re-employment in Central Civil Services and Posts) Rules, 1979, as amended from time to time and I have been duly released/retired/discharged from the Armed Forces on (copy of discharge book enclosed).

- 1. I confirm that I have not at any time prior to this appointment, secured any employment on the civil side (including Public Sector Undertakings, Autonomous Bodies/Statutory Bodies, Nationalized Banks, etc.), by availing of the concession of reservation of vacancies admissible to Ex-servicemen.
- 2. I understand that if my above statement is false, Bank have a right to terminate my service without assigning any further reasons and without prejudice to such further action as may be taken as per rules/law for submitting false undertaking.

| Place: | |
|--------|------------------------|
| Date: | Signature of candidate |
| | Name: |
| | Address: |
| | |
| | |

Letter of Undertaking

| I, | | S/o | |
|--------------------------------|--|---|---|
| | | | |
| | | | |
| refer to | your letter No. | dated | |
| advisin | g me about my appointment as | | |
| I under | stand that the offer made to me is p | provisional & subject to | |
| 1. | Fulfilling all the prescribed eligib | ility criteria. | |
| 2. | My being found medically fit and | l | |
| 3. | Submission of various documents | s / certificates and mentioned in the offe | er letter. |
| The sai | d documents submitted by me shal | ll be deemed to be material for the purp | ose of this appointment. |
| | - | d eligibility criteria and all the copies and shall be deemed to be material for t | |
| any thi prescrib termina | ing is found to be false and/or a bed, my candidature / appointment | on, statements and claims are true to be incomplete resulting in non-fulfillment would be treated as void ab-initio and his-representation, false representations | ent of eligibility criteria as I the services are liable to be |
| | | | |
| | | Signature of the | he Candidate |
| | | (Name | |
| | | S/D/W/O | |
| | | Roll No | |
| Place: | | | |
| Date: | | | |

CHARACTER AND ANTECEDENTS VERIFICATION REPORT (APPLICATION FORM)

| To The Superintendent of Po Police Office, | | | | |
|--|---|--|---|---------------------------------------|
| Subject : Application fo | r Employee Verification | <u>1</u> | | |
| Sir, | | | | |
| Alias (if any): 2. Father (Full Name 3. Spouse (Full Name 4. Occupation: | r the RRB Act, 1976 and the Bank requires that me issued to me. My persorded Initials): | I having its Head Offing character and ante nal particulars are as i | ce at Tulsi tower, 9 th Becedents may be ver follow: | Road, Sardarpura, |
| H.NoPolice Station State | Sector/Village/LocPin code Voter Card/Driving License dress): | /Ration Card etc.) | | Photo (Self signed) |
| 10. Particulars of Prev Nature of Employ Address: Particulars of Prev 11. Particulars of relat | int address since : | nt) Local Address | | |
| S.No. Name (1) | Father's Name | Occupation | Local Address | |
| (2)(3) | | | | |
| | | | (Signature of A | Applicant) |
| Father/Husband's Nar Address : | (For use | | (-3 | Photo (Attested by issuing Authority) |
| | | | | · |

कर्मचारियों द्वारा हस्ताक्षरित घोषणा

प्रारूप ''क''

| राजस्थान मरूधरा ग्रामीण बैंक (अधिकारी और कर्मचारी) | स्थान | | | |
|---|--|--|--|--|
| सेवा विनियम, 2010 द्वारा आबद्ध होने की घोषणा | दिनांक | | | |
| मैं इसके द्वारा यह घोषणा करता हूं कि मैंने राजस्थान मरूधरा ग्रामीण कर्मचारी) सेवा विनियम, 2010 (संशोधनों सिहत) को पढ़ लिया है उ और इसके द्वारा मैं स्वीकार करता हूं और उक्त विनियमों से आबद्ध करता हूं:— पूरा नाम | और समझ लिया है | | | |
| | | | | |
| गोपनीयता की घोषणा | | | | |
| मैं जो (राजस्थान मरूधरा ग्रामीण बैंक) की सेवा में नियुक्त हो चुका घोषणा करता हूँ कि बैंक के कामकाज के सम्बन्ध में किसी भी जा गोपनीय समझूंगा और किसी व्यक्ति को प्रत्यक्ष या अप्रत्यक्ष रू करूंगा / करूंगी जब तक कि मुझे किसी न्यायिक या अन्य प्राधिकारी ह बाध्य नहीं किया जाए या बैंक द्वारा मुझे अपने कर्त्तव्यों के निर्वहन में निर्देश न दिया जाए । पूरा नाम | नकारी को बिल्कुल प से प्रकट नही द्वारा ऐसा करने को | | | |
| नियुक्ति की प्रकृति | | | | |
| नियुक्ति की तारीख | | | | |
| हस्ताक्षर | | | | |
| साक्षी | | | | |
| तारीख | | | | |



राजस्थान मरूधरा ग्रामीण बैंक

Rajasthan Marudhara Gramin Bank

(भारत सरकार, राज॰ सरकार एवं एस.बी.आई का संयुक्त उपक्रम) (Joint venture of Govt. of India, Govt. of Raj. & SBI)

कार्मिक एवं मानव संसाधन विकास विभाग

प्रधान कार्यालय, जोधपुर Head Office, Jodhpur 9th B Road, Sardarpura,342003 www.rmgb.in e-mail:hrd@rmgb.in Phone: 0291-2593128

सत्यापन फॉर्म

ATTESTATION FORM

सत्यापन फॉर्म में गलत सूचना देना या तथ्यात्मक सूचना को दबाकर रखना उम्मीदवार को अयोग्य घोषित कर सकता है और ऐसा होने पर उम्मीदवार को बैंक में नियुक्ति के लिए अयोग्य ठहराया जा सकता है। यदि सत्यापन फॉर्म में गलत सूचना दी गई है या तथ्यात्मक सूचना को दबाकर रखा गया है और यह तथ्य किसी व्यक्ति के सेवा के समय ध्यान में आता है, तो उसकी सेवा समाप्त की जा सकती है। The furnishing of false

Affix Passport Size Photo of the Candidate

Fax: 0291-2657764

information or suppression of any factual information in the attestation form would be a disqualification and is likely to render the candidate unfit for appointment in the Bank. If the fact that false information has been furnished or there has been suppression of any factual information in the attestation form comes to notice any time during the service of a person his/her service would be liable to be terminated.

| | ce of a person his/her service would be hable to be | | T |
|----|--|----------|------|
| 1. | पूरा नाम (बड़े अक्षरों में) उपनाम के साथ लिखें, यदि कोई है | SURNAME | NAME |
| | (यदि आपने किसी भी स्तर पर कोई नाम या उपनाम जोड़ा है | | |
| | या छोडा है, तो कृपया उल्लेख करें) | | |
| | Name in full (In block letter) with aliases, if any | | |
| | (please indicate if you have added or dropped at | | |
| | any stage any part of your name or surname). | | |
| 2. | पूरा वर्तमान पता (अर्थात गांव, थाना और जिला या मकान सं. | | |
| | लाईन / स्ट्रीट / रोड़ एवं शहर) एवं जिला मुख्यालय का नाम | | |
| | Present address in full(i.e. Village, Thana | | |
| | and District or House no. Lane/street/Road/ | | |
| | Town and Name of the District head quarter). | | |
| 3. | (क) पूरा स्थायी पता (अर्थात गांव, थाना और जिला या | | |
| | मकान सं. लाईन / स्ट्रीट / रोड़ एवं शहर) एवं जिला | | |
| | मुख्यालय का नाम | | |
| | Full Permanent address in full(i.e. Village, Thana | | |
| | and District or House no. Lane/Street/Road/ | | |
| | Town and Name of the District head quarter). | | |
| | (ख) अगर मूल रूप से भारत के अलावा किसी अन्य देश | | |
| | के निवासी हैं, तो उस देश का पता और भारतीय संघ | | |
| | में स्थानान्तरण की तिथि | | |
| | ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | | |
| | If originally a resident of Country other than | | |
| | India, the address in that Country and the date | | |
| | migration to Indian union. | <u> </u> | |

4.उन स्थानों का विवरण (निवास की अवधि सहित) जहां आप पिछले पांच वर्षों के दौरान एक से अधिक वर्षों तक रहे हैं।

Particulars of places (with period of residence) where you have resident for more than one year at a time during the preceding five year-

| | 1 | <u> </u> | |
|------|----|--|---|
| से | तक | पूरा निवास का पता (अर्थात गांव, | पूर्ववर्ती कॉलम में उल्लिखित |
| From | То | थाना और जिला मकान संख्या के लिए | स्थान के जिला मुख्यालय का नाम |
| | | लाईन / स्ट्रीट / रोड़ एवं शहर) | Name Of the Distt. |
| | | Residential address in full(i.e.Village,Thana and District or House no.Lane/Street/Road/Town | Headquarters of the place mentioned in the preceding column |
| | | | |
| | | | |
| | | | |

- 5. (क) पिता का पूरा नाम उपनाम के साथ, यदि कोई हो तो
 - (a) Father's name in full with alias, if any.
 - (ख) वर्तमान डाक पता (अगर मृत्यु हो गई तो अंतिम पता)
 - (b) Present postal address(If dead, give last address)
 - (ग) स्थायी पता
 - (c) Permanent address
 - (घ) पेशा (d) Profession
 - (ड.) अगर सेवा में है, तो पदनाम और कार्यालय पता
 - (e) If in service, give

 Designation and official

 Address.
 - 6. (क) पति / पत्नी का पूरा नाम
 - (a) Spouse name in full
 - (ख) पेशा (b) Profession
 - (ग) पदनाम और कार्यालय पता
 - (c) Designation and office address
 - 7. नागरिकता / Nationality of
 - (a) पिता / Father
 - (b) माता / Mother
 - (c) पति / पत्नी Spouse
 - 8. यर्थात जन्म तिथि / Exact Date of birth:

वर्तमान आयु / Present age

मैट्रिक के समय आयु Age at matriculation:

9. (क) जन्म स्थान (a) Place of birth:

(जिला और राज्य जहां के रहने वाले हो)

Distt. and State in which Situated

(ख) जिला और राज्य जहां के रहने वाले हो

District and State to which you belong

- 10. (क) आपका धर्म (a) Your religion
 - (ख) क्या आप अन.जाति / अनु.जनजाति के सदस्य है? अगर उत्तर हॉ है, तो इसका नाम बताएं
 - (b) Are you member of Schedule Cast/Schedule Tribe answer
 'YES' or 'NO' and if the answer is 'YES' state the name thereof.

11. शैक्षणिक योग्यताएं जिसमें 15 साल की आयु से लेकर शिक्षा का स्थान व वर्षों के साथ स्कूल और कॉलेज का स्थान दर्शाया गया हो।

Educational qualifications showing places of education with Schools and colleges since 15th years of age:-

| (पूरे पते के साथ | प्रवेश करने की | छोडने की तारीख | उत्तीर्ण की | उत्तीर्ण करने |
|---|-------------------------|------------------------|--------------------|--------------------|
| स्कूल / कॉलेज)Name | तारीख | Date of <u>leaving</u> | गयी परीक्षा | का वर्ष |
| school/college <u>with</u> <u>full address</u> | Date of <u>entering</u> | | Examination passed | Year Of Passing |
| | | | | - |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

12. यदि आप किसी भी समय सेवा में रहे हैं, तो उसका विवरण दें।

If you have at any time been employed, give details:-

| ir you have at any time been employed, give details. | | | | | | | |
|--|-----------|----------------|-------------------------|---------------|--|--|--|
| धारित पद का नाम, | अवधि | Period | कार्यालय, व्यवसाय | सेवा को छोडकर | | | |
| निष्पादित कार्य | | | _ प्रतिष्ठान या संस्थान | जाने की वजह | | | |
| Designation | से / From | तक / To | का पूरा पता | Reason for | | | |
| post held | | | Full address of | leaving the | | | |
| description of | | | The office/firm | job | | | |
| work | | | Institution | | | | |
| | | | | | | | |
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13. क्या आपको कभी गिरफ्तार किया गया है, नजरबंदी किया गया है या किसी अपराध के लिए आपको किसी न्यायालय द्वारा प्रतिबंधित किया गया है/जुर्माना लगाया गया है/सजा दी गई है अथवा संघ लोक सेवा आयोग द्वारा परीक्षा में बैठने से वर्जित/निष्कासित किया गया हो?

अगर उत्तर हॉ है, तो केस का पूरा ब्यौरा, जुर्माना, दोष सिद्धि , दण्डादेश आदि का उल्लेख करें।
Have you ever been arrested or kept under detention or boun down/fined/ convicted by a court of law for any offence, or debarred/disqualified/restricted by the Public Service Commission from appearing at its examination selections or debarred from taking any examination or rusticated by authority/institution?

If answer is 'YES', full particulars of the case detention, fine, conviction, sentence etc. should be given.

14. क्या इस अनुप्रमाणन फॉर्म को भरते समय किसी भी न्यायालय विश्वविद्यालय या किसी भी शैक्षणिक प्राधिकरण / संस्था में आपके विरुद्ध कोई मामला लिम्बत है यदि (I) अथवा (II) में पूछे गये प्रश्नों के संबंध में आपके उत्तर हॉ में हो तो आपको इस अनुप्रमाणन फॉर्म भरते समय मामले, गिरफ्तारी, निरोध जुर्माने, दोषसिद्ध तथा दण्डादेश आदि के पूरे बयौरे प्रस्तुत करने चाहिए। तािक इस फॉर्म को भरते समय न्यायालय / विश्वविद्यालय / शैक्षणिक प्राधिकरण आदि के समक्ष जो मामला लिम्बत हो उसका स्वरूप बतलाना चािहए इस जानकारी के अतिरिक्त जहां लागू हो वहां निम्नलिखित ब्यौरे भी दिये जायेगे:—

| क्र.स. | मद | हॉं / ना (यदि हॉं, तो विवरण भी दें) |
|--------|------------------------|-------------------------------------|
| I | अपराध / आरोप | |
| II | पुलिस थाने मे पंजीबद्ध | |

| III | यदि न्यायालय में चालान प्रस्तुत किया गया हो तो | |
|------|--|--|
| | न्यायालय का नाम | |
| IV | मामले का क्र./न्याया. द्वारा उसका निपटारा किस | |
| | तिथि को किया गया | |
| V | दिया गया दण्ड | |
| VI | क्या दोषमुक्त कर दिया गया? | |
| VII | दोषमुक्ति संदेह के लाभ पर आधारित थी या मामला वापस ले लिया गया था? | |
| VIII | क्या किसी ऐसे संग्रम या संगठन जो सरकार द्वारा | |
| | विधि विरुद्ध घोषित किया गया था अथवा किया गया | |
| | है, के सदस्य है या उसके सहयोगी रहे है? यदि ऐसा | |
| | हो तो पूर्ण विशिष्टियां दे, जैसे संग्रम/संगठन का नाम | |
| | सदस्यता अथवा सम्बद्धता की कार्यवाही अवधि इत्यादि | |

यदि इस फॉर्म को भरने और भेजने के बाद उम्मीदवार को नजरबंद या गिरफ्तार किया जाता है अथवा उस पर मुकदमा चलाया जाता है या उसे बंदी बनाया जाता है तो अथवा उस पर जुर्माना किया जाना है या उसे दोषसिद्ध पाया जाता अथवा उसे विवर्जित किया जाता है तो ब्यौरे यथास्थिति, राज्य लोक सेवा आयोग या उस प्राधिकारी को जिसे अनुप्रमाणन फॉर्म पहले भेजा गया हो, तत्काल सूचित किये जाने चाहिये अथवा यह माना जाएगा कि तथ्यात्मक जानकारी छिपाई गई है, अतः यह स्वयं उम्मीदवार के हित में होगा कि वह उन मामलों के पूरे ब्यौरें प्रस्तुत करें, जिनसें उसे गिरफ्तार किया गया था, उस पर अभियोजन चलाया गया था, आदि भले ही मामले में अन्तिम रूप से प्रतिवेदित कर दिए हो (खात्मा) वापस ले लिए हो या उनमें अन्ततः दोषमुक्ति हो गई या समझौता कर लिया गया हो।

यदि तथ्य कि अनुप्रमाणन फॉर्म में असत्य जानकारी दी गई है या यह कि कोई तथ्यात्मक जानकारी छिपाई गई है, किसी व्यक्ति की सेवा के दौरान किसी भी समय ध्यान में आए तो, उसकी सेवाएं समाप्त की जा सकेंगी।

DECLARATION

मैं प्रमाणित करता / करती हूं, कि पूर्वोक्त सूचना मेरी सर्वोत्तम जानकारी और विश्वास के अनुसार सही और पूर्ण है। मैं ऐसी किसी परिस्थिति से परिचित नहीं हूं, जो मुझे बैंक से रोजगार हेतु मेरी योग्यता को क्षिति पहुंचा सकती है। मेरे आवेदन पत्र में मेरे द्वारा दिये गये कथन के संबंध में पुलिस जांच पडताल सहित बैंक द्वारा कोई भी जांच कभी भी किसी भी समय (तुरंत / निकट भविष्य में) पर करने में मुझे भी आपित नहीं है।

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 in the Bank. I have/will have no objection to the Bank making enquiring at any time (immediately/in the near future) regarding the statements made by me in the application, in any manner they decide to do so inclusive of police enquiry into my antecedents.

| Signature of candidate |
|------------------------|
| Name: |
| Date: |
| Place: |
| Distt. |
| Mobile No.: |

शपथ पत्र

| मै | | | पुत्र / पुः | त्री श्री | |
|-------------|----------------|---|---|--|---------------|
| | | उम्र | वर्ष पता | | |
| | | | का निवार | | |
| | 1. 2. 3. | मैं भारत का न यह है कि मैं हूं व न ही मुद्द यह है कि मेरे न्यायालय या यह है कि आ वारण्ट जारी वि | नागरिक हूँ। किसी अपराध के लिये भारत में हो इस सम्बन्ध में दो वर्ष के क ए विरुद्ध किसी भी न्यायालय में अदालत में कोई प्रकरण नहीं च जि तक मेरे विरुद्ध किसी कान् किया हुआ नहीं है । | किसी न्यायालय द्वारा दोषी व गरावास की सजा हुई है। मंं किसी भी अपराध के सम्बन् वल रहा है। नून के अन्तर्गत किसी न्याया | ध में भारत के |
| | 5. | यह हा क मर | ो जन्म तिथि दिनांक | ह І | |
| स्था दिन | | : 5 : | | | शपथकर्ता |
| | | | सत्यापन | | |
| | | | शपथपत्र | <u>[</u> | |
| | | | | | |
| कि | ਤਾ | परोक्त शपथ प | पुत्र / पुत्री श्री त्र की मद संख्या 1 से 5 में | शपथपूर्वक तस् | दीक करता हूं |
| अनु | KH1. | र सहा व सत्य | है, कुछ भी असत्य नहीं है। | | |
| स्था दिन | | :- 5 :- | | | शपथकर्ता |
| | | | | | 11777/11 |

अनुलग्नक - 'अ' (केवल अधिकारियों के लिए)



आरएमजीबी राजस्थान मरुधरा ग्रामीण R M G B RAJASTHAN MARUDHARA GRAMIN **RAJASTHAN MARUDHARA GRAMIN BANK**

(भारत सरकार, राजस्थान सरकार एवं भारतीय स्टेट बैंक का संयक्त उपक्रम)

| | (Joint Venture of Govt. of India, Govt. of Rajasthan a | and State Bank of India) | |
|---------|--|------------------------------|---|
| | शाखा जिला जिला जिला | | |
| विर्त्त | गिय वर्ष 31 मार्च, 20 की समाप्ति पर शेयरों, प्रतिभूतियों, रि योजना में निवेश इत्यादि में लेन—देनों की सूचना देने के | 4.0 | 5 |
| 1. | नाम | पहचान क्रमांक | |
| | पदनाम | | |
| 2. | वेतनमान | | |
| | वर्तमान वेतन | | |
| 3. | वित्तीय वर्ष के दौरान शेयरों, प्रतिभूतियों, डिबेंचरों, म्यूचुअल फण्ड योजनाओं इ लेन-देन का विस्तृत ब्यौरा | त्यादि में किये गये प्रत्येक | |
| 4. | उस पार्टी/फर्म का ब्योरा जिसके साथ लेन-देन किया गया :- (क) क्या पार्टी आवेदक से सम्बन्धित है (ख) क्या आवेदक ने अपने समय अपने पद की हैसियत से पार्टी से कोई लेन- क्या आवेदक का निकट भविष्य में उसके साथ कोई लेन-देन करने की संभावन | | |
| 5. | स्त्रोत/स्त्रोतों जिससे वित्त पोषण किया गया । (क) निजी बचत (ख) अन्य स्त्रोत जिसका विवरण दिया गया है। | | |
| 6. | अन्य कोई प्रासंगिक तथ्य जिसकी आवेदक चर्चा करना चाहेगा | | |
| | | | |
| | घोषणा | | |
| में एतव | द्द्वारा घोषणा करता/करती हूँ कि ऊपर दिया गया विवरण सही है। | | |
| | | | |
| स्थान | : | (|) |
| दिनांक | ō: | हस्ताक्षर पदनाम ····· | |
| | | | |

प्रपत्र/FORM NO. II

RMGB/AR-101 अनुलग्नक — ब



राजस्थान मरुधरा ग्रामीण बैंक RAJASTHAN MARUDHARA GRAMIN BANK

(भारत सरकार, राजस्थान सरकार एवं भारतीय स्टेट बैंक का संयुक्त उपक्रम)

| | | | • | vi. of ilidia, Govi. of Rajastilali alid State | Balik of fildia) | |
|---|---|--|--------------------------------|---|---|-----------|
| | | | कोः | | | _ |
| राजस्थान मरुधरा ग्रामीण बैंक (अधिकारी और कर्मचारी सेवा विनियम 2010) RAJASTHAN MARUDHARA GRAMIN BANK (OFFICERS & EMPLOYEES SERVICE REGULATION 2010) | | | | iक 31.3.20 को तरल आस्तियों एवं निवेशों HER THAN IMMOVABLE PROPERTY) AND LIABILITIE | | |
| नाम/Name | नाम/Name | | | पहचान क्रमांक/I.D. No | पदनाम/Designation | |
| बैंक में कार्यग्रहण करने की तिथि/Date of Joining | | | | मूल वेतन/BASIC SALARY | | |
| आस्तियाँ ASSETS A. Liquid Assets & Investment(including deposits & LIC Policies) | | | | | देनदारियाँ LIABILITIES | |
| विवरण Description | रकम/मूल मूल्य Amount/ Original Price | जिसके नाम में हैं व उससे सम्बन्ध Held in the name of & relationship | कैसे प्राप्त की How acquire | वार्षिक आय प्राप्त हुई Annual Income derived | 1. बैंक तथा अन्य वित्तीय संस्थाओं से देनदाि Liabilities to the Bank other financial In | |
| 1 | 2 | 3 | 4 | 5 | 2. मित्रों एवं सम्बन्धियों के प्रति देनदारियाँ Liabilities to Friends & relatives | |
| चल सम्पत्तियाँ B. Movable Pi | roperties | | | | 3. अन्य देनदारियाँ (यदि कोई हो) Other Liabilities (if any) | |
| यदि आवश्यक ह | हो तो अन्य पन्ना लगावें। | | | | दिनांक | हस्ताक्षर |
| N.B. Additional sheets may be attached where necessary | | | | | Date | Signature |

Note:

- 1. In the case of shares, securities debentures etc. value and approximate market value as on the date of statement may be mentioned.
- 2. In the case of Life Insurance Policies the date of maturity may also be stated.
- 3. Under B information may be given regarding items like (a) Gold/gold ornaments: approximate weight only be stated. (b) Silver including ornaments, vessels etc. (approximate weight) (c) other precious metals, items of jewellery, precious stones forming part of jewellery etc.: Approximate value to be stated (d) (i) Motor cars (ii) Scooters/Motor cycles (iii) Refrigerator/air-conditioner (iv) Radios/television sets and any other articles, the value of which individually exceeds Rs. 25,000/- (e) Value of items of movable property individually worth less than Rs. 25,000/- other than articles of daily use such as clothes, utensils, books, crockery etc. added together as lump sum.
- 4. In column 4, may be indicated whether the property was acquired by purchase, inheritance, gift or otherwise.
- 5. Under Liabilities brief details should be given.

हस्ताक्षर/ Signature

दिनांक :

आरएमजीबी R M G B

राजस्थान मरुधरा ग्रामीण बेंक RAJASTHAN MARUDHARA GRAMIN BANK

प्रपत्र/FORM NO. III

(भारत सरकार, राजस्थान सरकार एवं भारतीय स्टेट बैंक का संयुक्त उपक्रम) (Joint Venture of Govt. of India, Govt. of Rajasthan and State Bank of India)

| | | | • | ovt. of India, Govt. of Rajast | | • | |
|--|---|--|------------------------------|---|---|------------------------------------|--|
| | शाखा ' | • | को | ड जिला '''' | • | ••••• | |
| | आस्तियों ए | वं देयताओं क | ग विवरण–पत्र/ STAT | TEMENT OF ASSET | S AND LIABII | LITIES | |
| | | | | नाम/Name | : | | |
| अधिकारियों द्वारा स्वयं अपने अथवा अपने जो कि प्रवर्तक/स्टाफ कोटा के अन्तर्गत उ DETAILED STATEMENT IN RESPE PROMOTER'S/EMPLOYEES QUOTA | 31 मार्च 20 को खरीदे ग CT OF SHARES/DEBENTUI | ए हैं का विस्तृ त RES PURCH <i>E</i> | । विवरण ASED UNDER | · | _ | | पहचान क्रमांक/I.D. No |
| NAME AND ALSO THOSE HELD IN | | | | मूल वेतन /B | sasic Salary: | | |
| क्र. सं. S. No. | कम्पनी का नाम Name of the Company | शेयरों की संख्या No. of Shares | अंकित मूल्य Face Value | अभिग्रहण की लागत Cost of acquisition | क्या प्रवर्तक स्टाफ कोटा है? Whether Promoter's employee's quota | कैसे प्राप्त किया? How acquired | अभिग्रहण के समय किस पद पर थे तथा उस समय कम्पनी ने कोई ऋण अथवा अन्य सुविधा प्राप्त की हो। Position held at the time of acquisition and if the company had any borrowing or other facilities at that time |
| (अ) स्वयं A. Self | | | | | | | |
| (ब)पति–पत्नी अथवा आश्रित बच्चे (कृपया नाम तथा सम्बन्ध बताएँ) Spouse and Dependent Children (Please give name and relationship) | | | | | | | |
| 2.भैंने 31 मार्च 20 को समाप्त हु Any additions/deletions to this state स्थान: | | | | | | | <u> </u> |

RMGB/AR-101 अनुलग्नक – 'द'

SHANTA - JODHPUR 2 2654321

RAJASTHAN MARUDHARA GRAMIN BANK Staff Service Regulation 2010



राजस्थान मरुधरा ग्रामीण बैंक RAJASTHAN MARUDHARA GRAMIN BANK

(भारत सरकार, राजस्थान सरकार एवं भारतीय स्टेट बैंक का संयुक्त उपक्रम) (Joint Venture of Govt. of India, Govt. of Rajasthan and State Bank of India)

| शाखा ''''' कोड जिला ''' | | | | | | | | | | | | |
|--|-------------------------|---|--|--|--------------------|--|---------------------------------|--|--|---|--|--|
| STATEMENT OF IMMOVABLE PROPERTY HELD | | | | | | | Name : | | | | | |
| AS AT FIRST APPOINTMENT/THE 31ST MARCH (e.g. Lands, House, Shops, Other Building etc.) | | | | | | | Designation: | | | | | |
| | | | | | | | Date of Joining :Basic Salary : | | | | | |
| S. No. | Description of Property | Precise location (Name of Distt. Div-Taluka & Village in which the property is situated & also its distinctive number etc.) | Area of land (In case of land & buildings) | Nature of land in case of landed property | Extant of Intt. | If not in own name state in whose name held & his/her relationship if any, to the employee | Date of acquried | How acquired (Whether by purchases, mortagage, lease, inheritance gift or otherwise) & name with details of person/persons from whom acquired(address & connection of the employee if any, with the person/persons concerned) please see note No. 1 overleaf | Value of the property (See note 2 overleaf) | Particulars of Sanction of appropriate authority if any | Total annual income from the property | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | |
| | | | | | | | | | | | | |
| Branch | | | | | | | | | | | | |
| Dat | Date Signature : | | | | | | | | | | | |

Note:

(1) For purpose of column 9 the term 'Lease' would mean a lease of immovable property from year to year for any term exceeding one year or reserving a yearly rent. Where however, the lease of immovable property is Obtained from person having official dealings with the employee, such a lease should be shown in this column, irrespective of the term of the lease, whether it is short term, or long term and periodicity of the payment of rent.

Note:

- (2) In column 10 should be shown:
 - (a) Where the property has been acquired by purchase, Mortgage or lease or lease the price or premium paid for such acquisition.
 - (b) Where it has been acquired by lease, the total annual rent thereof also and
 - (c) Where the acquisition is by in-heritance, gift or exchange, the approximate value of the property so acquired

Note:

(3) The annual return in respect of immovable property may also be submitted in this form as 31st. March.