

I/54163/2021

**Government of India
Central Water Commission
Estt.VI Section**

**3rd Floor, Sewa Bhawan,
R.K. Puram, New Delhi-110066**

Dated the 9th April, 2021.

Office Memorandum

Sub. : Clarification regarding appointment to the grade of Junior Engineer (Civil & Mechanical) in the Central Water Commission.

The undersigned is directed to refer to this Commission's letter of even number dated 26.03.2021 on the above mentioned subject and to say that all the candidates selected to the post of Junior Engineer (C&M) through SSC JE Exam, 2018, may be allowed to join the post, if they produce medical certificate of fitness issued by a Civil Surgeon or a District Medical Officer along with other required documents including the character certificate.

2. Further, it has been found that certain offices under CWC are insisting for original dossier of the candidates. In this regard, it may be clarified that the original dossiers of the candidates are kept in CWC (HQ) only for official purpose and the joining is made based on the copy of the dossiers sent through e-mail. The dossiers of the candidates have already been sent to concerned Superintending Engineers through e-mail and as such the field offices of CWC should not insist for original dossiers for the purpose of joining of the candidates.

3. This issues with the approval of CE (HRM).

**(Ratnakar Yadav)
Under Secretary
Tel.No.29583304**

To,

I/54163/2021

All the Superintending Engineers (Coord.), CWC.

NEW PROFORMA
ANNEXURE-I

ATTESTATION FORM

WARNING :

Affix signed passport
size (5 cm x 7 cm appx)
copy of recent photo-
graph where asked for

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 Government.

2. If detained, arrested, prosecuted, bound down fined, convicted, debarred, acquitted etc. Subsequent to the completion and submission of this form the details should be communicated immediately to the authorities to whom the attestation form has been sent early, failing which it will be deemed 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 BLOCK capitals) with aliases, if any (Please indicate if you have added or dropped in any stage any part of your name or surname	SURNAME	NAME
2.	Present Address in full i.e. Village, Thana and District or House No., Lane/Street/ Road and Town.		
3.	a)	Home Address in full i.e. Village, Thana and District or House No., Lane/Street/ Road and Town and name of District Headquarters.	
	b)	If originally a resident of Pakistan, the address in that country and the date of migration to Indian Union.	

Contd..2/-..

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. 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 and District or House No., Lane/Street/ Road and Town).	Name of the District Headquarters of the place mentioned in the preceding column.

- 5.

	Name	Nationality (by birth or by domicile)	Place of Birth	Occupation (if employed give designation & official address)	Present Postal address (if deal give last address)	Permanent Home address
i) Father (Name in full aliases, if any)						
ii) Mother						
iii) Wife/ Husband						
iv) Brother(s)						
v) Sister (s)						

5(a) Information to be furnished with regard to son(s) and/or daughter(s) in case they are studying/living in a foreign country:-

Name	Nationality (by birth and/or by domicile)	Place of Birth	Country in which studying/living with full address	Date from which studying/living in the country mentioned in previous column.

6. Nationality

7. (a) 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 -
 (c) District and State to which you father originally belong -

9. (a) Your Religion -
 (b) Are you member of a SC/ST? Answer in Yes or No. -

10. Educational Qualification showing places of education with year in School and College since 15th year 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 or State Government or a semi-government 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 date of employment up-to-date.

Period		Designation & nature of employment	Emoluments	Full name & address of employer	Reasons for leaving previous service
From	To				

- 11.(b) If the previous employment was under the Government of India, a State Government/an Undertaking owned or controlled by the Government of India or a State Government/an Autonomous Body/University/Local Body.

If you had left service on giving a month's notice under the Rule 5 of the Central Civil Service (Temporary Service) Rules, 1965 or any similar corresponding rules were any disciplinary proceedings framed against you, or had you been called upon to explain your conduct in any matter at the time you gave notice of termination of service or a subsequent date before your services actually terminated.

Contd..5/-..

- 12(1) 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) Have you ever been debarred from any examination or rusticated by any University or any other educational authority, institution ? Yes / No
h) Have you ever been debarred/disqualified by any Public/ Staff Selection Commission or any of if 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 time of filling up this Attestation Form ? Yes / No
k) Whether discharged/expelled/withdrawn from any training institution under the Government or otherwise ? Yes / No
- 12(2) If the answer to any of the above mentioned question is Yes, give full particulars of the case/arrest/detention/fine/conviction/sentence/ punishment etc. and the nature of the case pending in the Court/University/Educational authority etc. at the time of filling up this form.

NOTE:(i) Please also see the warning at the top of this attestation form.
(ii) Specific answer to each of the questions should be given by striking out 'Yes' or 'No' as the case may be.

13. Names of two responsible person of 1.
your locality or two references to
whom you are known. 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 _____

IDENTITY CERTIFICATE

(Certificate to be signed by any one of the following)

- i. Gazetted Officers of Central or State Government;
- ii. Members of Parliament or State Legislative belonging to the constituency where the candidates or his parent/guardian is ordinarily resident;
- iii. Sub-Divisional Magistrate/ Officers;
- iv. Tehsildars or Naib/Deputy Tehsildars authorized to exercise magisterial powers;
- v. Principal/Head-Master of the recognized school/college/institution where the candidate studied last;
- vi. Post-Master;
- vii. Panchayat Inspectors.

Certified that I have known Shri/Smt./Kumari_____

_____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.

Date_____

Signature_____

Place_____

Designation or status and address

TO BE FILLED BY THE OFFICE

- i. Name, Designation and full address of the appointing authority.
- ii. Post for which the candidate is being considered

ANNEXURE-II

CHARACTER CERTIFICATE

Certified that I have known Shri/Smt./Kum. _____
_____ son/wife/daughter of Shri _____
_____ for the last* _____ years _____
months and that to the best of my knowledge and belief he/she bears a reputable character
and has no antecedents which render him/her unsuitable for Government Employment.

Shri/Smt./Kum. _____ is not related to me.

Place _____

Signature

Date _____

Designation _____

Office Stamp

* At least 6 months at the time of signing the certificate.

CHARACTER CERTIFICATE

Certified that I have known Shri/Smt./Kum. _____
_____ son/wife/daughter of Shri _____
_____ for the last* _____ years _____
months and that to the best of my knowledge and belief he/she bears a reputable character
and has no antecedents which render him/her unsuitable for Government Employment.

Shri/Smt./Kum. _____ is not related to me.

Place _____

Signature

Date _____

Designation _____

Office Stamp

* At least 6 months at the time of signing the certificate.

ANNEXURE-III

DECLARATION TO BE OBTAINED FROM THE NEW ENTRANTS
TO GOVERNMENT SERVICE

I, Shri/Shrimati/Kumari_____

declares as under:

- i) that I am unmarried/a widower/ a widow
- ii) that I am married and have only one spouse living
- iii) that I have entered into or contracted a marriage with a person having a spouse living. Application for grant of exemption is enclosed.
- iv) That I have entered into and contracted a marriage with another person during the life time of my spouse. 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

* Please delete clause/clauses not applicable.

MEDICAL FITNESS CERTIFICATE

“I hereby certify that I have examined Shri/Smt./Kumari
..... a candidate for employment in the
..... Department, and cannot discover
that has any disease (communicable or otherwise),
constitutional weakness or bodily infirmity, except..... I
do not consider this a disqualification for employment in the office
.....”

Signature of District Medical Officer /Civil Surgeon

OFFICE SEAL

CANDIDATE'S STATEMENT AND DECLARATION

The candidate must make the statement required below prior to his medical examination and must sign the declaration appended thereto. His attention is specially directed to the warning contained in the Note below:-

1.	State your name in full (in block letters)			
2.	State your age and place of birth			
3.	(a) Have you ever had smallpox' intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis? or (b) Any other disease or accident requiring confinement to bed and medical or surgical treatment?			
4.	When were you last vaccinated ?			
5.	Have you or any of your near relations been affected with consumption, scrofula, gout, asthma, fits, epilepsy or insanity ?			
6.	Have you suffered from any form of nervousness due to overwork or any other cause ?			
7.	Have you been examined and declared fit for Government service by a Medical Officer/Medical Board, within the last three years ?			
8.	Furnish the following particulars concerning your family			
	Father's age if living and state of health	Father's age at death and cause of death	Number of brothers living, their ages and state of health	Number of brothers dead, their ages at death and cause of death
	Mother's age if living and state of health	Mother's age at death and cause of death	Number of sisters living, their ages and state of health	Number of sisters dead, their ages at death and cause of death

I declare that all the above answers to be, to the best of my belief, true and correct.

I also solemnly affirm that I have not received disability certificate/pension on account of any disease or other conditions.

Candidate's Signature.....

Signed in my presence.

Signature of Medical Officer