



आई सी एम आर - राष्ट्रीय जैव आयुर्विज्ञान जन्तु संसाधन सुविधा
स्वास्थ्य अनुसंधान विभाग,
स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार
ICMR- National Animal Resource Facility for
Biomedical Research
Department of Health Research,
Ministry of Health & Family Welfare,
Government of India

No. NARF/Estt./Doc-Tech./2023-24/699

Date: 12.01.2024

NOTICE

In response to ICMR-NARFBR, Hyderabad Technical recruitment, the provisional list of candidates selected for the technical posts vide No. Estt/NARFBR/Rect/2023 dated 30.12.2023, the following formats are to be submitted at the time of joining to the technical posts.

1. Medical examination certificate from the Civil Surgeon of Govt. Medical Hospital (in original).
2. Duly filled Attestation form for verification of Character and Antecedents (two copies in original).

The formats for the same are enclosed.

Sd/- xxx
Administrative Officer
ICMR-NARFBR
Hyderabad

MEDICAL CERTIFICATE

Affix latest
Photograph of the
candidate and duly
attested by the
Medical Officer

I have carefully examined
Shri/Smt/Kum_____ a candidate for employment under Government of India as _____ and cannot discover that he/she has any disease combinable or otherwise constitutionally affection or bodily infirmity except that his/her weight is in excess/below the standard prescribed or except _____, I do not consider this a disqualification for the employment he/she seeks.

I do further certify that in my option his/her general physical condition is such that it will enable him/her to perform the duties of executive service effectively.

His/her age is according to his/her own statement is _____ Years and by the appearance about _____ years (I also certify that he/she has marks of small pox vaccination on _____)

CHEST MEASUREMENT IN CMS:

On full Inspiration: _____
On full expiration: _____
Height: _____ Weight: _____
His / Her vision in normal _____
Hypermetrophic: _____
(Here enter the degree of defect and the Strength or correction glasses)
Myopic: _____
(Here enter the degree of defect and the Strength or correction glasses)
Astigmatic (Simple or mixed): _____
(Here enter the degree of defect and the Strength or correction glasses)
Hearing is Normal / Defective : (Much of Slight) _____

Urine close chemical examination show:
1. Albumin: _____ 2. Sugar: _____ 3. Slate specific gravity: _____

Personal marks of identification:

1. _____
2. _____

Signature of the candidate
Place: _____
Date: _____

**Signature of the Medical Officer
with seal
CIVIL SURGEON OF GOVERNMENT
HOSPLITAL**

ATTESTATION FORM

ANNEXURE-I

| | | | |
|---|---|--|--|
| <p align="center">Affix Signed Passport Size (5 cms X 7 cms) Apporx. copy of recent photography</p> | | <u>"WARNING"</u> | |
| | | 1. | The furnishing of false information or suppression of any factual information in the Attestation Form would be disqualification, and is likely render the candidate unfit for employment under the Government. |
| | | 2. | If detained, arrested, prosecuted, bound down fines 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/her services would be liable to be terminated. |
| 1. | Name in full (in block capitals 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 & Town) | | |
| 3. | Home Address in full (i.e. Village, Thana and District, Or House No., Lane / Street / Road & Town and name of District Head Quarters), State | | |
| 4. | Particulars of Places (with periods of residence) where you have resided for more than one year at a time during the proceeding five years . In case of stay abroad (including Pakistan particulars of all places where you have resided for more than one 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 Head Quarters of places mentioned in preceding column. |
| | | | |

Contd....2/

| 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 | | |
|---------------|---|---|----------------|--|---|------------------------|--|--|
| a) Father | | | | | | | | |
| b) Mother | | | | | | | | |
| c) Spouse | | | | | | | | |
| d) Brother(s) | | | | | | | | |
| e) Sister(s) | | | | | | | | |
| 5 (a) | Information to be furnished with regard to sons(s) and / or daughters in case they studying / living in a foreign country | | | | | | | |
| Name | | Nationality (by birth & or by domicile) | Place of Birth | 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) | 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 your father originally belong | | | |
| 9. | (a) | Your Religion | | | |
| | (b) | Are you a member of Scheduled Caste / Scheduled Tribe/Other backward classes (Answer Yes/No) | | | |
| 10. | Educational qualifications showing places of education with years in Schools and Colleges since 15 th year of age | | | | |
| | | Name of the 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 Central Or State Government Or a semi-government Or a Quasi-Government body Or an autonomous body Or a public sector Undertaking Or a private firm Or an institution?. If so, give full particulars with date of employment up-to-date. | | | |
| | | Period | Designation, emoluments & nature of employment | Full name and address of employer | Reasons for leaving previous service |
| | | From To | | | |
| | | | | | |
| (b) | | If the previous employment was under the Government of India / a State Government / Undertaking owned Or controlled by 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 Rule 5 of the Central Government Services (Temporary Service) Rules 1965, Or any similar corresponding rules, were any disciplinary proceedings framed against you, Or had you have been called upon to explain your conduct in any matter at the time you gave notice of termination of service, Or at a subsequent date(s) before your service actually terminated? | | | |
| | | | | | |

| | | | |
|---|---|---|----------|
| 12(i) | (a) | Have you ever been arrested? | Yes / No |
| | (b) | Have you ever been prosecuted? (i.e. has a chargesheet in a criminal case been filed against you in any court of law) | 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 Court of Law? | Yes / No |
| | (f) | Have you ever been convicted by 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 service commission / Staff selection Commission for any of its examination / selection? | Yes / No |
| | (i) | Is any case is pending against you in any Court of Law at the time Or filling up this Attestation Form? | Yes / No |
| | (j) | Is any case is pending against you in any University Or other educational authority /institution at the time of filling this Attestation Form? | Yes / No |
| | (k) | Whether discharged / expelled / withdrawn from any training / institution under the Government Or otherwise? | Yes / No |
| (ii) | | 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 / Or the nature of case pending in the Court / University / Educational Authority, etc at the time of filling up this Attestation Form | |
| | | | |
| Notes | (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 person of your locality Or two reference to whom you are known: (give full details i.e. name, address, email and contact number) | | 1. |
| | | | 2. |
| <p>I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware Or any circumstances which might impair my fitness for employment under government.</p> <p align="right">Signature of Candidate:</p> <p align="right">Name: _____</p> <p align="right">Date: _____</p> <p align="right">Place: _____</p> | | | |

IDENTITY CERTIFICATE

(Certificate to be signed by one of the following)

| | |
|--------|--|
| (i) | Gazetted Officer of Central Or State Government |
| (ii) | Members of Parliament Or State Legislature belonging to the constituency where the candidate Or his/her parents / guardian is ordinary resident; |
| (iii) | Sub-Divisional Magistrates/Officers; |
| (iv) | Tehsildars / Or Naib / Deputy Tehsildars authorized to exercise magisterial powers; |
| (v) | Principal /Head Master of recognized School / College / Institution where the candidate studied last; |
| (vi) | Block Development Officer; |
| (vii) | Post Master's; |
| (viii) | Panchayat Inspectors. |

Certified that I have known Dr/ Shri / Smt /Kumari _____ son /
daughter of Dr./Shri/Smt. _____ for the last _____
year's _____ months and that to the best of my knowledge and belief, the particulars furnished by him / her are
correct.

Date:

Place:

Signature:

Name: _____

Designation Or Status _____

& address _____

TO BE FILLED BY THE OFFICE

1. Name, Designation and full address of the appointment authority:

Name: _____

Designation _____

Address:

2. Post for which the candidate is being considered : _____

