

6. Marital Status Married Unmarried (Tick the relevant Box)

7. Nationality
(Please refer to Para 5 of the Instructions attached)

8. Category Code
(Please refer to Para 8 (c) of the instructions attached) (See Code List)

9. Category for age relaxation (if applicable) Code
(Please refer to Para 8(d) of the instructions attached) (See Code List)

10. Ex-Serviceman (Please refer to Para 8(f) of the instructions attached)

a) Date of Enrolment Day Month Year

b) Date of release/discharge Day Month Year

c) Reasons for release/discharge after earning pension

(i) At own request. Yes No

(ii) Otherwise

11. Detail of Fee (Please refer to Para 7(ii) of the instructions attached)

Name of Bank	Branch	Draft No.	Amount	Date

12. (a) Details of qualifications :-

Sr. No.	Examination Passed	Board/University	Month & Year of Passing	Subject	Percentage of Marks

12 (b) Do you possess the following qualification obtained from a University established in India by Law :-

i) M.B.B.S. Yes _____ No _____

ii) Registered with the Punjab Medical Council **or** with any other duly constituted Medical Council in India; and Yes _____ No _____

iii) Punjabi of Matric or its equivalent standard. Yes _____ No _____

iv) If no, are you ready to pass such examination within six month of their joining the service failing which their services shall be terminated. Yes _____ No _____

v) If no, are your Sikh Migrant and ready to pass such examination within two years after joining the service ? Yes _____ No _____

12 (c) **Details of Experience**

Department/Organisation	Post held	From	To	Pay Scale

vi) Are you in Government Service? Yes _____ No _____

If yes, have you informed your Head of the Office/ Department. Yes _____ No _____

vii) Have you ever been disqualified by Punjab/Union Public Service Commission or any other State Public Service Commission? Yes _____ No _____

viii) Have you been convicted by any Criminal Court ? Yes _____ No _____

If yes, what was the punishment given. _____

ix) Whether there is any Criminal case pending/registered against you? Yes _____ No _____

If yes then what is the present status of the case. _____

(PLEASE SIGN ONLY RELEVANT DECLARATIONS)**DECLARATION**

I hereby declare that all statements made in this application form are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the selection, action may be taken against me by the Commission or the Government, which may result in my disqualification, cancellation of candidature and/or removal from service, if selected.

Place:

Date:

Signature of the Candidate

I hereby declare that I am employee of Government of Punjab/Other State Governments/Central Governments and I have informed my Head of the Office/Department in writing that I am applying for this post.

Place:

Date:

Signature of the Candidate

FOR OFFICE USE ONLY

Diary No. _____ Date _____ Fee Received Rs. _____ entered on page no. _____

Superintendent
For Secretary PPSC

Form of certificate to be submitted by a candidate belonging to Scheduled Caste and Scheduled Tribe in support of his/her claim

FORM OF CASTE CERTIFICATE

It is certified that Shri/Shrimati/Kumari _____ son/daughter
of Shri _____ of village/Town _____
District/Division _____ State of _____ belongs to _____
Caste/Tribe, which has been recognized as a Scheduled Caste/Scheduled Tribe as per “The Constitution
(Scheduled Castes) Order, 1950”.

2. Shri/Shrimati/Kumari _____ and/or/his/her family ordinarily resides
in village/town _____ of District/Division _____
of the State of _____.

Signature _____

Designation _____

(Seal of office) _____

Place:

State:

Date:

* Please score out whichever is not applicable.

Note: The word 'ordinarily resides' here will have the same meaning as is given in Section 20 of the Representation of People Act, 1950.

Form of certificate to be submitted by a candidate belonging to a Backward Class in support of his/her claim

FORM OF CERTIFICATE OF BACKWARD CLASS

1. This is to certify that Shri/Shrimati/Kumari _____ son/daughter of Shri _____ of village/Town _____ in District/Division _____ of the State of Punjab belongs to the _____ Caste, which is recognized as a Backward Class in terms of Punjab Government letter No. _____ dated _____.

2. This is also certified that he/she does not belong to any category of persons/sections mentioned in column 3 of the schedule to Punjab Government, Department of Welfare letter No.1/41/93-RCI/459 dated 17-01-1994 & No. 1/41/93-RCI/1597 dated 17/08/2005.

3. Shri/Shrimati Kumari _____ and/or/his/her family ordinarily reside(s) in village/town _____ of District/Division _____ of the State of Punjab.

Signature _____

Designation _____

(Seal of the officer concerned) _____

Place:

State:

Date:

Form of certificate to be submitted by a candidate who is a lineal descendant of an ex-serviceman in support of his/her claim

LINEAL DESCENDENT CERTIFICATE

(As per Punjab Government Notification No. G.S.R.9/Const/Art. 309, 234 and 318/Amd (5)/2003 dated 6 Nov 2002 and letter No. 15/7/92-4DW/Part 11/2056 dated 30 Apr 2003)

Certified that Sh/Smt/Miss _____ is a Lineal Descendent/ Wife of

No. _____ Rank _____

Name _____ who is an Ex-Serviceman as per Identity Card No. _____

issued by District Sainik Welfare Officer _____ and residing at

Village/Town _____ PO _____ District. _____

2. This certificate is issued to Sh./Smt/Miss _____ whose date of birth is _____ strictly for the purpose of:

*(a) employment for the post of _____ in the office of _____

*(b) admission for (name of the class/course) _____ in _____ (name of the educational Institution).

*(Strikeout whichever is not applicable)

District Sainik Welfare Officer

No.: _____

Place: _____

Date: _____

CHECK LIST

Have you attached the following certificates duly attested by Gazetted Officer:

	<u>Yes</u>	<u>No</u>
1. Date of Birth Certificate of Matriculation/Higher Secondary	<input type="checkbox"/>	<input type="checkbox"/>
2. Degree Certificate M.B.B.S.	<input type="checkbox"/>	<input type="checkbox"/>
3. Detail Marks Card of M.B.B.S.	<input type="checkbox"/>	<input type="checkbox"/>
4. Proof of Registered with the Punjab Medical Council or with any other duly constituted Medical Council in India; and	<input type="checkbox"/>	<input type="checkbox"/>
5. Punjabi Passed Certificate.	<input type="checkbox"/>	<input type="checkbox"/>
6. Reserve Category Certificate	<input type="checkbox"/>	<input type="checkbox"/>
7. Bank Draft	<input type="checkbox"/>	<input type="checkbox"/>
8. Three Identical Passport size photographs (Latest photographs duly attested by Gazetted Officer)	<input type="checkbox"/>	<input type="checkbox"/>
9. Whether concerned declarations have been signed or not?	<input type="checkbox"/>	<input type="checkbox"/>