## List of additional documents to be produced at the time of joining on the post of Officer Assistant (Multipurpose)

- 1. To execute at your own cost prescribed agreement of service on Stamp Paper of Rs. 100/- (to be filled at the time of joining at reporting venue).
- 2. To sign declaration of Fidelity and Secrecy.
- 3. To furnish names of two respectable persons preferably known to the Bank and not related to you for reference.
- 4. If you are presently in the service of Government or Public Sector Undertaking or Government Undertaking/Corporation or any other Organization, you will have to resign from your present employment and submit a satisfactory discharge certificate at the time of joining bank's duty. In no circumstances, the Bank will allow you to retain lien, or join on transfer/deputation. Besides, you will have to submit Certificate of Performance and Conduct in a Sealed Envelope from your present Employer.
- 5. To submit self attested copies of all certificates/testimonials &documents for our record.
- 6. To Produce Medical Fitness Certificate issued by a Chief Medical Officer not below the rank of Civil Surgeon of Government Hospital. The X-ray plate of yourchest and Radiologist Report must be brought.
- 7. Four sets of Attestation Form with photograph affixed on each form for verification of your character and antecedents from the Police Authorities.
- 8. To submit character Certificates, from the Principal or Head of the Department of the college/Institute last attended by you and/ or Gazetted Officers or Bank Officers. Certificates given by relatives will not be acceptable.
- 9. To execute a Bond for Rs. 50,000/- (Rs. Fifty Thousand only) with surety, for serving the Bank for a minimum period of 02 years, before joining the Bank as per Annexure-I. In case, you resign from or leave/abandon the service and/or display negligence in the performance of the duty assigned to you leading to termination of your service as per Rules and Regulations laid down by the Bank before specified period of two years; for all losses, charges and expenses, you will indemnify the Bank upto the extent of Bond amount of Rs. 50,000/- as stated above. The Indemnity Bond must be Notarized on Stamp paper as per rate prevailing in the respective States, where the Indemnity Bond is to be executed. For example, in state of Haryana, the Indemnity Bond shall be executed at stamp paper of Rs. 150/- as per rates prevailing in the Candidate's State.
- 10. Relevant Certificate if relaxation in age is claimed.
- 11. Who have already member of National Pension System (NPS) they must submit copy of Pran & submit Request for Subscriber Shifting (available on Bank's website under Recruitment link).

Note:- Candidates will not be allowed to join bank's service if he/ she fails to produce the relevant eligibility documents as mentioned above.

#### AGREEMENT OF SERVICES

(To be stamped as per State Stamp Rules)

| This Agreeme     | nt made   | at       | this         |                     | day of   |            | 20 b     | etween   |
|------------------|-----------|----------|--------------|---------------------|----------|------------|----------|----------|
| Sarva Haryana    | Gramin    | Bank,    | a body cor   | porate              | constitu | ted unde   | r the R  | egional  |
| Rural Bank Ac    | t, 1976 a | and Gaz  | zette Notifi | cation o            | dated 29 | 9.11.2013  | 3 issued | by the   |
| Government of    | f India,  | Ministr  | y of Finan   | ce, De <sub>l</sub> | partmen  | nt of Eco  | nomic    | Affairs  |
| (Banking Divis   | sion), No | ew Dell  | ni having i  | ts Head             | l Office | at Roht    | ak, here | einafter |
| referred to      | as        | the      | 'Bank'       | of                  | the      | First      | Part     | and      |
| Shri/Ms          |           |          |              |                     |          |            | _S/o/D   | /o/W/o   |
| Sh               |           |          |              |                     |          |            | Resident | of       |
|                  |           |          |              |                     |          | particular | s of     | whose    |
| identity and p   | hotogra   | ph are   | given in     | the id              | lentity  | form, at   | ttached  | hereto   |
| (hereinafter cal | led the e | mploye   | e) of Secon  | nd Part.            |          |            |          |          |
|                  |           |          |              |                     |          |            |          |          |
| Whereas on th    | e applica | ation of | the emplo    | yee, th             | e Bank   | has agre   | eed to t | ake the  |
| employee Sh./N   | ∕Is       |          |              | S/o/D/o             | /W/o S   | h          |          |          |
| into its service | on the te | erms and | d condition  | s hereir            | nafter m | entioned   | and sul  | bject to |
| the general Rul  | es and R  | egulatio | ons of the E | Bank.               |          |            |          |          |

Contd....2

Now, this Agreement witnessth as under:-

- 1. **COMMENCEMENT:** This Agreement shall commence from the date hereof or the date on which the employee assumes charge of his/her duties whichever is earlier, and shall remain in force until it is duly terminated.
- 2. **REMUNERATION:** The employee will receive such salary and allowances as may be fixed for him/her from time to time by the Bank generally or specifically.

#### 3. **DUTIES:**

- a) The employee will attend office regularly during the working hours as fixed by the Bank and perform the duties entrusted to him/her faithfully and honestly. He/She further agrees to work outside the working hours whenever called upon to do so by his/her superior officers.
- b) The bank shall have the right to allot any duties to the employee for which he/she may be considered fit and competent and shall have the right to transfer him/her to any branch of the Bank or to send him/her to any other place, where the business of the Bank may need his/her services.
- c) The employee shall not either during the continuance of his/her employment hereunder, or thereafter, except in the course of his/her duties as such employee, divulge to any person whatsoever, and shall use his/her best endeavor to prevent the publication or disclosure of any information as to the practices, business dealings or affairs of any of its customers with the Bank or any other matter

which may come to his/her knowledge by reason of his/her employment under this Agreement.

That the employee shall devote the whole of his/her time, attention and abilities, etc., to the business of the Bank and shall obey all Orders issued from time to time or given to him/her by his/her superior officers in all respects, and conform to and comply with the directions given and Regulations made by the Bank and shall diligently and faithfully serve the Bank and use his/her utmost endeavor to promote its interests.

d) That the employee shall be a whole time servant of the Bank and shall not; so long he/she holds any appointment in the Bank, engage directly or indirectly either in any employment, business, trade or speculation of any kind.

#### 4. TERMINATION:

- (1) (a) No employee shall leave or discontinue his service in the Bank without first giving notice in writing to the Appointing Authority of his/her intention to leave or discontinue his/her service or resign;
  - (b) The period of Notice required shall be three months, in case of confirmed employee and one month, in case of employee who is on probation.
  - (c) In case of breach of clause (b) (1) above, an employee shall be liable to pay to the Bank as compensation, a sum equal to his/her pay for the period of notice required of him/her.
- (2) Notwithstanding anything to the contrary contained in sub-regulation (1) above, an employee against whom disciplinary proceedings are pending, shall not leave, discontinue or resign from his/her service in the Bank without the prior approval in

writing of the Appointing Authority and any notice of resignation given by such employee before or during the disciplinary proceedings shall not take effect unless it is accepted by the Competent Authority.

#### **Explanation:**

Disciplinary proceedings shall be deemed to be pending against an employee for the purpose of this Regulation, if he/she has been placed under suspension or any notice has been issued to him to Show Cause why disciplinary proceedings should not be instituted against him/her until final Orders are passed by the Competent Authority.

- (3) a) The Bank will be entitled to dispense with the employee's services, where during the period of probation, including the period of extension of probation, if any, the Appointing Authority is of the opinion that the employee is not fit for confirmation, after giving one month's notice or pay in lieu thereof.
  - b) If an employee remains absent from duties or be late in attendance without having obtained the permission of the Competent Authority and in case of sickness or accident without submitting a proper Medical Certificate from a Medical Practitioner acceptable to the Bank or absents himself/herself from duty without leave or overstays his/her leave or is habitually unpunctual in attendance or is negligent in performance of his/her duties or is guilty of misconduct or dishonesty to the Bank, shall be liable to such disciplinary measure as the Competent Authority may impose.

Contd....5

of this Agreement, the Bank shall have the right to terminate his/her service without notice and without paying him/her any salary in lieu thereof.

- Competent Authority appointed by the Bank for his/her purpose, shall on any matter mentioned in sub-clause (b) above, be conclusive and binding on the employee and shall not be questioned by him/her.
- 5. **LEAVE, ETC.** The employee undertakes to be bound by all Rulesand Regulations in force from time to time in all matters including promotion, transfer, travelling and other allowances, leave, security, Provident Fund, etc.

#### 6. **SECURITY:**

- a) The employee shall give such security as the Board of Directors or the Chairman or any other Competent Authority of the Bank appointed in this behalf may determine from time to time, for due performance of this Agreement and for recoupment of any loss caused to the Bank due to his/her negligence, misconduct, fraud or violation of any terms of this Agreement.
- b) That the Bank shall have a first lien on all dues of the employee including security as well as salary and the Bank shall have the right to recover all losses suffered by it through fraud, negligence or misconduct of the employee from such dues.
- c) The security given by the employee shall remain under the control of the Bank during the entire period of service of the employee with the Bank and till the settlement of all claims of the Bank for

Contd....6

- and conditions of the agreement by the employee.
- d) Subject to the rights of the Bank reserved under clause (b) and (c) above, the security held shall become refundable to the employee on the expiry of 90 days after termination of his/her service.
- e) If the Bank suffers any loss on account of non-performance of any of the conditions of this Agreement or on account of any act or omission of the employee or by reason of negligence, fraud, misconduct or dishonesty in the discharge of his/her duties, the Bank shall be entitled to recover the loss from the cash security of the employee and to recover the deficiency, if any, from his/her personal and other property.
- 7. **DURATION OF AGREEMENT:** This Agreement shall remain inforce as long as the employee continues in the service of the Bank notwithstanding any change in his/her designation, status, salary or the duties and responsibilities entrusted to him/her.

#### **8. SUSPENSION:**

The employee on his/her dismissal from service for misconduct shall not be entitled to any emolument for the period of his/her suspension except a subsistence allowance.

9. **DISABILITY OF EMPLOYEE:** After the termination of his/heremployment for any reason whatsoever, the employee will not at any time or for any purpose, use the name of the Bank in connection with his/her name or any other name in any way calculated to suggest that he/she is or has been connected with the Bank business nor in any way holds himself/herself out as having or having had any such connection any customer of the Bank which he/she may have acquired in the course of or as incident to this employment hereunder for

Contd .... 7

of the Bank.

10. On the termination of his/her services for whatever cause, the employee shall surrender to the Bank complete charge of all articles assets, books of the Bank, keys and all other things on which he/she may have control or be in his/her charge and shall also surrender documents papers, etc., over which he/she may have any dominion while as an employee of the Bank.

11. The Power of Attorney of the employee shall become inoperative and he/she shall surrender the same to the Bank for cancellation. If the employee commits any default in respect of any of the terms and conditions mentioned in this clause, he/she shall be liable to forfeit security.

12. In case the employee is covered by any Award/Settlement in force from time to time, any terms in this Agreement against the provisions of such Award shall not be binding on the employee during the operation of the Award.

IN WITNESS WHEREOF the parties hereto have set their hands in the presence of witnesses,

| WITNESSES:      | Signature of the Employee |
|-----------------|---------------------------|
| 1               |                           |
|                 | SARVA HARYANA GRAMIN BANK |
| 2               |                           |
|                 |                           |
| GENERAL MANAGER |                           |

#### SCHEDULE - I

#### **Declaration of Fidelity and Secrecy**

|   | Date   |
|---|--|
|   | Place  |
| I, do hereby declared best of my skill and ability execute and poor office Assistant (Multipurpose) of the Structure o | erform the duties required of me as<br>Sarva Haryana Gramin Bank, Head |
| I further declare that I will not divulge or  | allow to be divulged to any person                                     |
| not legally entitled thereto any information  | on relating to the affairs of the said                                 |
| Bank or to the affairs of any person hav  | ing any dealing with the said Bank                                     |
| and nor will I allow any such person to in  | spect or have access to any books                                      |
| or documents or electronic records belon  | ging to or in possession of the said                                   |
| Bank and relating to the business of the  | said Bank or the business of any                                       |
| person having any dealing with the said   | Bank.  |
| ,   | Signature  |
|   | Name in Full:  |
|   | Designation:   |
| Signed before me  |  |
| Signature   |  |
| Name in Full:   |  |
| Designation:  |  |

#### SCHEDULE - II

## Declaration to be obtained from every Employee on First Appointment.

| 1.    |        | lsS/o.W/o.D/o  |
|-------|--------|--|
|       | (i)    | That I am unmarried/a widower/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 spouse living. Application for grant of exemption is enclosed.  |
|       | (iv)   | To be modified.  |
| 2.    | that i | emnly affirm that the above declaration is true and I understand<br>in the event of the declaration being found to be incorrect after<br>opointment, I shall be liable to be dismissed from service. |
|       |        | Signature  |
|       |        | Name:  |
|       |        | S/o.W/o.D/o  |
|       |        | Address  |
| Place | )      |  |
| Date: |        |  |

## SCHEDULE-III Form B Declaration of Domicile

|        | Place   |
|--------|---|
|        | Date  |
|        |   |
| 1.     | I, the undersigned, having been appointed in the service of Sarva |
|        | Haryana Gramin Bank, Head Office, Rohtak hereby                   |
|        | declare (Place) in (District) as my                               |
|        | place of domicile.  |
|        |   |
| 2.     | *The above is my place of birth                                   |
|        | Or  |
|        | *The above is not my place of birth. My place of birth is         |
|        | (Place) in (District) but   |
|        | (Place) has been declared as my place of do micile                |
|        | for the reasons given below:                                      |
|        |   |
|        |   |
|        |   |
|        |   |
|        |   |
| Signat | ture  |
| Name   | in full   |
| Desig  | nation  |
| _      | e of appointment  |
|        | of appointment  |
| -      | 1.1   |

<sup>\*</sup>Strike out whichever is not applicable.

#### SARVA HARYANA GRAMIN BANK HEAD OFFICE: ROHTAK

| Name of Post:   |
|---|
| Name of the Candidate:  |
| Father's Name:  |
| Please furnish Name and Address of two respectable persons, preferably known to the Bank and not related to you for reference:- |
| (1)   |
|   |
| (2)   |

#### CERTIFICATE OF CONDUCT & PERFORMANCE

| Ref.No :   | Date :                                 |              |
|--|--|--------------|
| The Chairman,<br>Sarva Haryana Gramin Bank,<br>Plot No.1,<br>Sector-3, Rohtak  |  |              |
| Dear Sir,  |  |              |
| Reg: Shri/ Mrs/ Miss   |  | -            |
| This is to certify that Shri/Mrs./Miss With usfrom   | to                                     | _ working as |
| bears a good moral character. His/Her conducthas been goen good/satisfactory/average/unsatisfactory during the remained with us. | good and his/her perfo                 | ormance has  |
|  | Signature & Seal of Authority to issue |              |

N.B.: Candidate must bring this Certificate in a Sealed Cover from his/her present employer and submit the same to us at the time of joining alongwith other joining formalities.

#### MEDICAL REPORT

| A.      | To be filled in by the Examinee himself   |                |         |          |             |          |
|---------|---|----------------|---------|----------|-------------|----------|
| NAM     | E :   |                |         |          |             |          |
|         | NAME IN BLOCK LETTERS   |                |         |          |             |          |
| ADDI    | RESS  |                |         |          |             |          |
| 1.      | Have you ever had any serious illness   |                |         |          |             |          |
| 2.      | or Surgical operations?  Have you or has any member of your family ever been under treatment for tuberculosis?                    |                |         |          |             |          |
| 3.      | tuberculosis?   |                |         |          |             |          |
| 4.      | institution for any kind of these diseases?<br>Have you or has any member of your<br>family ever been under treatment for trachor |                |         |          |             |          |
| State i | if "Normal" – if not give particulars of any de   | parture from l | Normal  | :        |             |          |
| Husba   | and or single man   | Wife or sing   | le wom  | an       |             |          |
| Date of | of Birth:   | Date of Birth  | n :     |          |             |          |
|         |   |                | (Signat | ure of t | he Examinee | <u>-</u> |
| В. (То  | o be filled in by the Examining Doctor)   | Max.           | Min.    | Max.     | Min.        |          |
| a) He   | eart  |                |         |          |             |          |
| b) Ble  | ood Pressure  |                |         |          |             |          |
| c) Lu   | ings  |                |         |          |             |          |
| d) Ne   | ervous System   |                |         |          |             |          |
| e) Me   | ental condition & Intelligence  |                |         |          |             |          |
| f) Di   | igestive Organs   |                |         |          |             |          |
| g) Sk   | telton Bones & Joints   |                |         |          |             |          |
| h) Sk   | in  |                |         |          |             |          |
| i) He   | aring   |                |         |          |             |          |

| j) Sight (i) Without Glass   | R                | L        | R        | L         |
|--|------------------|----------|----------|-----------|
| (ii) With Glass (if worn)  | R                | L        | R        | L         |
| Cause of defect of sight   |                  |          |          |           |
| k) Genito Urinary Organ  |                  |          |          |           |
| l) Urine Albumen or Sugar Present  |                  |          |          |           |
| m) Teeth   |                  |          |          |           |
| n) Deformities   |                  |          |          |           |
| HEIGHT   |                  |          |          |           |
| WEIGHT   |                  |          |          |           |
| REMARKS: In case where the Medical Examiner being in perfect health and development, he/she she which he finds and whether it is of a permanent nat                              | ould state the   | exact na | ature of |           |
| Certify that I have this day examined the above narrand I certify that in my opinion, subject to any speciabove named is in good health and of sound constitution bodily defect. | cial observation | ns unde  | er 'Rema | arks' the |
| (Signature & Qualifications)  Address:   |                  |          |          |           |

DATE:

#### SARVA HARYANA GRAMIN BANK HEAD OFFICE: ROHTAK

(To be filled by the Candidate on the date of reporting for duty)

#### INSTRUCTIONS:

| 1. Filled in this form in your own handwriting.                                      |
|--|
| 2. Give complete answers to all questions. Check ( $\sqrt{\ }$ ) where necessary.    |
| Reporting for joining as   |
| PERSONAL DATA  |
| Full Name (in block Leters)  |
| Present Address  |
| Permanent Address  |
| Contact Mobile No.   |
| Alternate Mobile No.   |
| Email Id   |
| Date of Birth  |
| Age  |
| Years& Months  |
| Gender   |
| Nationality  |
| State to which You belong  |
| Religion   |
| Height   |
| Weight   |
| Do you belong to Scheduled Caste or Scheduled Tribe/Other Backward Caste(OBC): Yes/N |
| If Yes, State the Caste  |
| MARITAL-STATUS (Unmarried/ Married / Widowed / Divorced)                             |
| Number of Dependent Children Male /Female  |

| Number of other Dependents and their Relationships 1.   |          |
|---|----------|
| 2.  |          |
| 3.  |          |
| 4.  |          |
| Particulars of major illness, operation or accident, if any:  |          |
| Defects in sight, hearing or speech, if any:  |          |
| What is your total indebtedness, if any?  |          |
| Have you ever been prosecuted (omit traffic offences) or involved in  | Yes/No   |
| Any court proceedings? If yes, give details.  |          |
| Have you ever been debarred/disqualified by any institution from appearing at its examination, rusticated by any University or any other educational authority/institution? If yes, give details. | Yes / No |
| 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  |
| If yes, give details.   |          |
| Have you ever been abroad (If yes, give name of country visited and purpose thereof)  | Yes No   |
| Name of Father/Husband  |          |
| Occupation, if employed give exact<br>Designation and Name of Employer  |          |
| Monthly Income /Rs.   |          |
| Address for purpose of emergency  |          |
| Tel. No.  |          |

#### EDUCATION

Give Particulars of all examinations passed from Matriculation to University level.

| Exam/Degree | Subjects | %<br>Marks | Class/Div. | Position<br>at Board/<br>University | Years | School/<br>College | Board/<br>University |
|-------------|----------|------------|------------|-------------------------------------|-------|--------------------|----------------------|
|             |          |            |            | level                               |       |                    |                      |
|             |          |            |            |                                     |       |                    |                      |
|             |          |            |            |                                     |       |                    |                      |
|             |          |            |            |                                     |       |                    |                      |
|             |          |            |            |                                     |       |                    |                      |
|             |          |            |            |                                     |       |                    |                      |
|             |          |            |            |                                     |       |                    |                      |

|  |   |            |                | level         |        |       |       |
|--|---|------------|----------------|---------------|--------|-------|-------|
|  |   |            |                |               |        |       |       |
|  |   |            |                |               |        |       |       |
|  |   |            |                |               |        |       |       |
|  |   |            |                |               |        |       |       |
|  | RESEARCH - Publication of Books, Articles, etc.  Participation in Training Camps/Seminars |            |                |               |        |       |       |
| Professional/V                                       |   |            |                |               |        |       |       |
| Scholastic Hon                                       | ors – Fellov  | wships and | d Scholarship  | o, if any:    |        |       |       |
| What subject in college interested you most and why? |   |            |                |               |        |       |       |
| LANGUAGES  |   |            |                |               |        |       |       |
| Underline your                                       | Mother-to   | ngue and p | proficiency in | n other Langı | iages: |       |       |
| Speak  |   |            |                |               |        |       |       |
| Read   |   |            |                |               |        |       |       |
| Write  EXTRA CURRICULAR ACTIVITIES                   |   |            |                |               |        |       |       |
| LEADERSHIP<br>Were you a cap                         | ~   |            | n?             |               |        | Yes / | ' No  |
| Were you a me  | mber/capta  | in of a Un | iversity tean  | n?            |        | Yes / | No    |
| Were you an u  | nder officer  | or above   | in NCC?        |               |        | Yes / | No No |

Were you a secretary/president of a University Union? Yes / No

Name your hobbies and membership of professional organizations.

If employed, give the name & address of your present & past employer (s), including HGB. Also, give your avocation, business or otherwise including employment after completion of your education upto the date of your joining the Bank.

| -   |                        |                 |                       |  |  |
|---|------------------------|-----------------|-----------------------|--|--|
| Position held, exact designat   | ion and nature of work |                 |                       |  |  |
| Nature of business  |                        |                 |                       |  |  |
| Period  | From                   | То              |                       |  |  |
| Total Salary per month  | at start Rs.           |                 | at present Rs.        |  |  |
|   |                        |                 |                       |  |  |
| Note: If you have worked wi above in a separate sheet of I  | -                      | oyer, give your | employment history as |  |  |
| May we refer to your present  | t employer             |                 | Yes No                |  |  |
| List two persons other than relatives and former employers, personally known to you for more than three years, preferably known to the Bank.  1. Name |                        |                 |                       |  |  |
| Exact Address   |                        |                 |                       |  |  |
| Occupation, If employed, designation  |                        |                 |                       |  |  |
| Period known  |                        |                 |                       |  |  |
| Name and address  |                        |                 |                       |  |  |
| Exact Relationship  |                        |                 |                       |  |  |
| Status/Designation  |                        |                 |                       |  |  |

Business/Employment

| Exact Address  |   |
|--|---|
| Occupation, If employed, designation   |   |
| Period known   |   |
| Name and address   |   |
| Exact Relationship   |   |
| Status/Designation   |   |
| Business/Employment  |   |
| GENERAL  |   |
| Are you related to any present or ex-member of the staff?  | Yes/ No   |
| If yes, give name, designation, office where he is working or was last emp   | bloyed.   |
| Are you connected with or related to any of the Directors of this Bank?  | Yes / No  |
| Have you ever applied for working here before?   | Yes / No  |
| Have you ever worked here before?  | Yes / No  |
| State here any other facts about yourself that you would like to give us in your application. Attach a separate sheet, if required.  | support of  |
| I certify that the information given by me in this form is correct and compl knowledge and belief. I understand and agree that misrepresentation, falsift of material fact may be cause for rejection of my application or termina employment. The statements made in this Form may be verified from employers and any other persons who may have information concerning respectively. | fication, or omission<br>tion of service after<br>each of my former |
| Place : Date :   | ure of Applicant  |

2. Name

#### SARVA HARYANA GRAMIN BANK HEAD OFFICE : ROHTAK

#### **ATTESTATION-FORM**

(To be submitted 4 copies)

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 the 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 services would be liable to be terminated.

Affixlatest passport size photograph duly attested by a Gazetted Officer.

DATE OF REPORTING: .....

| PLACE OF     | REPORT   | ING:  |                         |                   |  |
|--------------|--|---|-------------------------|-------------------|--|
| (Please indi | icate if you   | lock Letters) with aliases, if any,<br>have added or dropped at<br>our name or surname).  | SURNAME                 | NAME              |  |
|              |  | full (i.e.Village, Thana and District Street/Road and Town).  |                         |                   |  |
|              | 3. (a) Home address in full (i.e.Village, Thana and District Or House No, Lane/Street/ Road, Town and name of the Distt. H.O.)   |   |                         |                   |  |
| ` '          | (b) If originally a resident of Country other than Inida, the address in that country and the date of migration to Indian Union. |   |                         |                   |  |
|              |  | es (with period of residence) where you ding five years:-   | have resided for more t | han one year at a |  |
| From         | То   | Residential address in full (i.e. Village, Thana and Distt. Or House No. Lane/Street/Road and Town mentioned in the preceding Column) | Name of the Distt H     | .Q. of the place  |  |

5.1 (a) Father's Name in full with alias, if any:

NAME OF POST: .....

- (b) Present postal address (if dead, give last address):
- (c) Permanent Home Address:
- (d) Profession:

(e) If in service, give designation and official address:

| 5.2     | (a) Husband's name in full:  |
|---------|--|
|         | (b) Profession:  |
|         | (c) Designation and office address:  |
| 6.      | Nationality of   |
|         | Father:  |
|         | Mother:  |
|         | Husband/Wife:  |
| 7.      | Exact date of birth:   |
|         | Present age:   |
|         | Age at Matriculation:  |
| 8.      | (a) Place of Birth:  |
|         | (b) Distt. and State in which situated :   |
|         | (c) Distt. and State to which you belong :   |
| 9.      | (a) Your Religion:   |
|         | (b) Are you a member of Scheduled Caste/Scheduled Tribe? Yes No  |
|         | If yes, state the name thereof:  |
| 10.     | Educational qualifications showing place of education with years in schools and colleges sinc $15_{th}$ year of age: |
|         | of School/College Date of entering Date of leaving Examination Passed Year of Passing                                |
| With 10 |  |
|         |  |
|         |  |
|         |  |
| 11. If  | you have, at any time, been employed, give details :   |
| Dooige  | nation of Post held Full address of the Reason for   |
| Design  |  |

- 12. Have you ever been arrested or kept under detention or bound down/fined/convicted by a Court of law for any offence, or debarred/disqualified by the Public Service Commission from appearing at its examination selections or debarred from taking any examination or restricted by authority/institution?
  - If answer is 'Yes' full particulars of the case detention, fine, conviction, sentence, etc. should be given.
- 13. Have you ever been convicted or any offences committed against woman, including conviction for dowry offences under the Dowry Prohibition Act, 1961, or under Section 304 B of IPC?
  - If answer is 'Yes' full particulars of the case, detention, fine, conviction, sentences, etc. should be given.

#### **DECLARATION**

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 enquiries at any time (immediately/in the near future) regarding the statements made by me in the application, in any matter they decide to do so inclusive of police enquiry into my antecedents.

SIGNATURE OF CANDIDATE

| PLACE:_ | <br> |  |
|---------|------|--|
| DATE: _ | <br> |  |

#### **SARVA HARYANA GRAMIN BANK**

Affixlatest passport

#### **HEAD OFFICE: ROHTAK**

#### **IDENTITY FORM**

| 1.  | Full Name:  | Affixlatest passport size      |
|-----|---|--------------------------------|
| 2.  | Designation:  | photograph duly self attested. |
| 3.  | Academic & Vocational Qualification:                            | daily dell'attocted.           |
| 4.  | Father's Name and Occupation: 4 (1):Name of spouse,if married:- |                                |
| 5.  | Caste:  |                                |
| 6.  | Complete Home Address:  |                                |
| 7.  | Present Address:  |                                |
| 8.  | Date of Birth:  |                                |
| 9.  | Height:   |                                |
| 10. | Mark of Identification:   |                                |
|     | a) Colour:  |                                |
|     | b) Built:   |                                |
| 11. | Relationship with any employee or Director of the Bank (g       | give names and                 |
|     | relationship in vernacular)                                     |                                |
| 12. | Date of Appointment with pay :Rs                                |                                |
| 13. | Date of signed photograph:                                      |                                |
| 14. | Left hand thumb impression:                                     |                                |
| 15. | PAN:  |                                |
| 16. | AadharNo.   |                                |
| 17. | Signature of employee:  |                                |
| 18. | Initial of the employee:  |                                |
| PI  | ace:  |                                |
| Da  | ate:  |                                |

#### **INDEMNITY BOND WITH SURETY**

(To be stamped as per State Stamp Rules)

| This Indemnity is made and executed at _        |                         | day of                     |
|---|-------------------------|----------------------------|
| 20by Shri                                       | S/o Shri                | a                          |
| permanent resident of                           |                         |                            |
| herein called "Employee", the party of the Fir  | rst Part,               |                            |
| AND   |                         |                            |
| ShriS/o Shripermanent resident of               |                         | a                          |
|   |                         | hereinafter                |
| called "Surety", the party of the Second Part,  | in favour of Sarv       | a Haryana Gramin           |
| Bank, a body corporate constituted under the I  | Regional Rural B        | Sanks Act, 1976 (21 of     |
| 1976) and Gazette Notification dated 29.11.20   | 13 issued by the        | Government of              |
| India, Ministry of Finance, Department of Econ  | nomic Affairs (Ba       | nking Division) having     |
| its Head Office at Rohtak hereinafter called "E | mployer Bank".          |                            |
| The terms 'Employee', 'Surety' and the 'Em      | <b>ployer Bank</b> ' un | nless repugnant to the     |
| context shall mean and include their heirs      | s, legal represe        | ntatives, successors,      |
| executors and administrators.                   |                         |                            |
| WHEREAS the Employee has been selected          | for appointment         | as <b>Office Assistant</b> |
| (Multipurpose) in the service of the Employ     | er Bank.                |                            |
| WHEREAS an Offer of Appointment contain         | ning the terms a        | and conditions of the      |
| appointment has already been issued to the      | e Employee vide         | e letter No. HO/HRD/       |
| / dated of the                                  | Employer Bank.          |                            |
| WHEREAS the acceptance of the terms an          | d conditions of         | the appointment has        |
| already been communicated to the Employer E     | Bank on                 |                            |
| by the Emp                                      | ployee.                 |                            |
|   |                         | Contd2.                    |

WHEREAS one of the terms and conditions of the appointment is the Employee has to serve the Employer Bank i.e. Sarva Haryana Gramin Bank for minimum period of two years after appointment, has to execute an indemnity with surety in favour of Employer Bank.

NO'

| W TH | HIS INDENTURE WITNESSETH as under:  |
|------|---|
| 1.   | In compliance of the aforesaid condition in Offer of Appointment subject to |
|      | which the Employer Bank has agreed to give appointment to the               |
|      | Employee, the Employee hereby undertakes to serve the Employer Bank         |
|      | for a minimum period of <u>two years</u> .                                  |
| 2.   | The party of the second part i.e. Sh  |
|      | S/o Sh agrees to stand as Surety for the due                                |
|      | performance of the obligation of the Employee under this agreement of       |
|      | indemnity. In case of breach of the terms of this indemnity by              |
|      | the Employee and failure to indemnify the Bank, the Surety shall be         |
|      | jointlyand severally liable to pay the amount of Rs. 50,000/- (Rs.          |
|      | FiftyThousand only) to Employer Bank immediately on demand.                 |
| 3.   | The Employee further agrees and undertakes that in case he/she              |
|      | commits breach of the above condition and resigns from or                   |
|      | leaves/abandons the service and/or neglects in performance of the           |
|      | duty assigned to him leading to termination of his/her service as per       |
|      | Rules and Regulations by the Employer Bank for all losses, costs,           |
|      | charges and expenses upto extent of Rs lakh and pay an                      |
|      | amount of Rs (Rs) only  |
|      | with the interest thereon @ 12 per cent per annum from the date of          |
|      | breach of the above till payment as liquidated damages/cost of              |
|      | training including on the job training, the employee at his/her place,      |
|      | and also on account of business loss suffered/to be suffered by             |
|      | Employer Bank during intervening period. The employee and surety            |
|      | agrees that assessment of liquidated damages as assessed at Rs.             |
|      | are reasonable, which they both agree to pay jointly                        |

and severally in case demand is made by the Employer Bank.

Contd.....3.

-3-

4. Notwithstanding anything contained herein above, furnishing of this

indemnity will not create any right in favour of the **Employee** to continue in

the service of Employer Bank for the aforesaid term of **two years**, and the

Employer Bank shall always have the right to take appropriate

actionagainst the **Employee** as per terms of the appointment letter and/or

the Rules and Regulations of the Employer Bank as applicable, in case of

commission of any misconduct by the Employee.

5. The amount specified above shall constitute a debt owing to the Employer

Bank and shall be recoverable from the Employee and the Surety jointly and

severally with interest thereon at the rate specified above till payment.

IN WITNESS whereof, the EMPLOYEE and the SURETY have put their

signatures in the presence of the witnesses.

Signed and delivered by the Party of the First Part i.e. the Employee having

perused and understood the contents terms of this Agreement .

Signed and delivered by the Party of the Second Part i.e. the Surety having

perused and understood the contents/terms of the Agreement.

1. WITNESS: EMPI

**EMPLOYEE SIGNATURE** 

NAME & ADDRESS:NAME & ADDRESS

2. WITNESS:

**SURETY SIGNATURE** 

NAME & ADDRESS:

NAME & ADDRESS

### FORM FOR GIVING INTIMATION FOR TRANSACTIONS IN SHARES, SECURITIES, DEBENTURES AND INVESTMENT IN MUTUAL FUND SCHEMES ETC.

| 1      | Name & Designation :   |
|--------|--|
| 2.     | Scale of pay & present pay :   |
| 3.     | Details of each transaction made in shares, securities, debentures, mutual funds schemes etc. during the period 01.04.20 to 31.03.20                                   |
| 4.     | Particulars of the party/firm with whom transaction made   |
|        | a) Is party related to the Applicant.  |
|        | b) Did the applicant have any dealing with the party in his official capacity at any time or is the applicant likely to have any dealings with him in the near future. |
| 5.     | Source or sources from which financed :- a) Personal savings b) Other sources giving details   |
| 6.     | Any other relevant fact which applicant may like to mention.   |
| DECL   | ARATION  |
| I here | by declare that the particulars given above are true.  |
|        |  |
|        |  |
|        | SIGNATURE  |
|        | NAME :   |
| PLAC   | E:   |
| DATE   |  |

## FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA

| This is to certify that Shri/Smt./Kumari  | , son/daughter of                                 |
|---|---|
| , of villager/town  | in District/Division                              |
| in the State/Union  | Territory belongs to the                          |
| community, which is recogn  | nized as Backward Class under Government          |
| of India, Ministry of Social Justice  | and Empowerment's Resolution                      |
| Nodated   |   |
| Shri/Smt/Kumari   | , and/or his/her family ordinarily reside(s)      |
| in theDistrict/Division   |   |
| Union Rerritory. This is also to certify that he/sh   | he does not belong to the persons/sections        |
| (Creamy Layer) mentioned in Column 3 of the   | e Schedule to the Government of India,            |
| Department of Personnel and Training, O.M. No. 3  | 36012/22/93-Estt.(SCT), dated 8.9.1993**.         |
|   | District Magistrate,<br>Deputy Commissioner, etc. |
| Dated :   | SEAL  |
| *-The Authority issuing the certificate may have to Government of India, in which the caste of the can ** As amended from time to time. |   |

Note:- The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

#### **Annexure - II OBC Declaration Performa**

## **DECLARATION/UNDERTAKING - FOR OBC (Non Creamy Layer) CANDIDATES ONLY**

|  | Mr./MsShri  |   |   |
|--|---|---|---|
|  | sident of village/town/city   |   |   |
| distance dis | strict  | StateSby the Government per orders contained that I do not belong the dated 8/9/1993, and Training dated 9/3/2004 and Res.) dated 14/16 | hereby hereby community which is of India for the purpose ined in Department of 012/22/93- Estt. (SCT) long to persons/sections Schedule to the above which is modified vide Office Memorandum of further modified vide |
| La   | also declare that the condition yer' of my parents is within March 31, 20 |   |   |
|  | ace:<br>ate:  | Sig   | nature of the Candidate   |

#### **NOTE:**

"The Appointment is provisional and is subject to the community certificate being verified through the proper channels. If the verification reveals that the claim of the candidate to belong to Other Backward Classes or not to belong to the creamy layer is false, his/her service will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provisions of the Indian Penal Code for production of False certificate."

Declaration/undertaking not signed by Candidate will be rejected

#### FORM OF CASTE CERTIFICATE

| This is to certify that Shri/Smt*./Kumari* |    | son/daughter* of | •                                  |    |
|--|----|------------------|------------------------------------|----|
|  | of | village/Town*    |                                    | in |
| District/Division*                         |    | of the           | e State/Union Territory*           |    |
| belongs to the Caste/Tribe*                |    | W                | which is recognised as a Scheduled |    |
| Caste/Scheduled Tribe* under               | :- |                  |                                    |    |

- The Constitution (Scheduled Caste) Order 1950:
- The Constitution (Scheduled Tribe) Order 1950:
- The Constitution (Scheduled Caste) (Union Territories) Order 1951:
- The Constitution (Scheduled Tribe) (Union Territories) Order 1951:

[As amended by the Scheduled Castes and Scheduled Tribes lists (Modification) Order 1956; the Bombay Reorganisation Act 1960, The Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act 1970, the North-Eastern Areas (Reorganisation) Act 1971, the (Constitution) Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976; the Constitution (Scheduled Tribes) Order (Amendment) Act, 1987; the Constitution (Scheduled Tribes) Order Amendment Act, 1991; and the Constitution (Scheduled Tribes) Order Second Amendment Act, 1991]

- The Constitution (Jammu & Kashmir) Scheduled Castes Order 1956
- The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976.
- The Constitution (Dadra & Nagar Haveli) Scheduled Castes Order, 1962.
- The Constitution (Dadra & Nagar Haveli) Scheduled Tribes 1962
- The Constitution (Pondicherry) Scheduled Castes Order 1964.
- The Constitution (Uttar Pradesh) (Scheduled Tribes) Order 1967
- The Constitution (Goa, Daman & Diu) Scheduled Castes Order, 1968
- The Constitution (Goa, Daman & Diu) Scheduled Tribes Order, 1968
- The Constitution (Nagaland) Scheduled Tribes Order 1970
- The Constitution (Sikkim) Scheduled Castes Order 1978
- The Constitution (Sikkim) Scheduled Tribes Order, 1978
- The Constitution (Jammu & Kashmir) Scheduled Tribes Order, 1989
- The Constitution (Scheduled Castes) Orders (Amendment) Act, 1990

| 2. Shri/Smt.*/Kumari*   | _ and/or* his/her* family ordinarily |
|---|--------------------------------------|
| reside(s) in Village/Town*  | of                                   |
| District/Division* of the State/Union Territory* of _   |                                      |
|   | Signature                            |
|   | Designation(With seal of Office)     |
| Place State   | (With sear of Office)                |
| Date Union Territory  |                                      |
| NOTE: The term 'Ordinarily resides' used here will<br>Section 20 of the Representation of the Peoples Act | C                                    |
| *(Please delete the words which are not applicable)   |                                      |

List of authorities empowered to issue certificate of verification:

- 2. Chief Presidency Magistrate/Addl. Chief Presidency Magistrate/Presidency Magistrate.
- 3. Revenue Officer not below the rank of Tehsildar.
- 4. Sub-Divisional Officer of the area where the candidate and/or his family normally resides.
- 5. Administrator/Secretary to Administrator/Development Officer Lakshdeep island.

### **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).   |
| 2. 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.   |
| 3. I understand that if my above claim is false my services will be terminated  |
| forthwith without assigning any further reasons and without prejudice to such   |
| further action as may be taken under the provisions of Indian Penal Code (IPC)  |
| for submitting false undertaking.   |
|   |
| Signature of candidate  |
| Place:  |
| Date:   |
| Government of   |

### INCOME & ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

| Certificate  | No  |  |
|--|---|--|
| Date :   |   |  |
|  | VALID FOR THE Y                                 | /EAR (2021-22)                                   |
| This is to permanent   | certify that Shri/Smt./Kumari resident of       | Son/daughter/wife of                             |
| State/Union  |   | Post Office District in the                      |
|  |   | raphisattestedbelowbelongstoEconomicallyWeakerSe |
| Grossannua   | llincome*ofhis/herfamily**isbelowRs.8lakh(Rupe  | eesEightLakhonly)forthefinancialyear.            |
| His/her fami   | ly does not own or possess any of the following | g assets***:                                     |
| I.   | 5 acres of agricultural land and above;         |  |
| II.  | Residential flat of 1000 sq. ft. and above;     |  |
| III.   | Residential plot of 100 sq. yards and above in  | n notified municipalities;                       |
| IV.  | Residential plot of 200 sq. yards and above in  | n. areas other than the notified municipalities  |
| 2.   | Shri/Smt./Kumari belongstothe                   | caste which is not recognized asa                |
| Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List) |   |  |
|  |   |  |
|  |   | Signature with seal of Office                    |
|  |   | Name   |
|  |   | Designation                                      |
|  |   |  |

Recent Passport size attested photograph of the applicant

<sup>\*</sup>Note 1 : Income covered all sources i.e. salary, agriculture, business, profession, etc.

- \*\*Note 2 :The term **'Family"** for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.
- \*\*\*Note 3 : The property held by a "Family' in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

#### NOTE:-

The Income and Asset Certificate issued 'by anyone of the following authorities in the prescribed format as given above shall only be accepted as proof of candidate's claim as 'belonging to EWS:

- (i) District Magistrate/Additional District Magistrate/ Collector/ Deputy Commissioner/Additional Deputy Commissioner/1st Class Stipendiary Magistrate/ Sub-Divisional Magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra AssistantCommissioner,
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/ PresidencyMagistrate,
- (iii) Revenue Officer not below the rank of Tehsildar and
- (iv) Sub-Divisional Officer or the area where the candidate and/or his family normally resides.

| Office           | Dist. No. | UID No. |
|------------------|-----------|---------|
|                  |           |         |
| Gratuity Code No |           | Date    |

# FORM FOR APPOINTMENT OF BENEFICIARY UNDER RULE 6 OF THE GRATUITY FUND OFFICE OF THE TRUSTEES OF SARVA HARYANA GRAMIN BANK EMPLOYEES GRATUITY FUND, H.O. ROHTAK

| Name of employee : Shri/Smt./Km |  |
|---------------------------------|--|
| Date of joining the service :   |  |

I hereby nominate the person/persons mentioned below to be beneficiary/beneficiaries in the manner shown against the respective names.

The amount due to any beneficiary who is a minor at the time of my death should be paid to the person whose name appears in column 5.

| Name and address of the beneficiary or beneficiari es | Relationship<br>with the<br>Employee | Whether major or minor  State date of birth in case of minor | Proportion<br>of benefit | Name and full address of the person to whom payment is to be made on behalf of the minor beneficiary | Sex & parentage of person mentioned in Column 5 | Signature of person mentioned in Column 5 in token of consent to receive benefit on behalf of minor |
|---|--------------------------------------|--|--------------------------|--|---|---|
| 1   | 2                                    | 3  | 4                        | 5  | 6   | 7   |
|   |                                      |  |                          |  |   |   |

The Trustees will be absolved from all liability in respect of my Gratuity Account on Paying the amount to me if I am alive or the person or persons named in column No.1 above after my death. My marriage or the remarriage or the marriage or remarriage of any one of my nominees will not affect the Trustee's right to get a full and final discharge from me if I am alive and in case of my death from my nominee as mentioned in column 1 above.

This nomination is in cancellation of any earlier nomination I have made under the Rules

Signature of Employee

| Signed by     | in our presence |
|---------------|-----------------|
| Witness No. 1 |                 |
| Designation   |                 |
| Signature     |                 |
| Occupation _  |                 |
| Address       |                 |
|               |                 |
|               |                 |
| Witness No. 2 |                 |
| Designation   |                 |
| Signature     |                 |
| Occupation _  |                 |
| Address       |                 |
|               |                 |

The General Manager, Sarva Haryana Gramin Bank Head Office: Rohtak. Respected Sir,

| Reg: Joining Report for the post of Office Assistant (Multipurpose) |
|---|
|---|

| In compliance to your office letter No. H, after completing all formali my joining report for the post of <b>Office Assis</b> (forenoon / afternoon). | ties (enclosed) I, hereby, submit |
|---|-----------------------------------|
| Kindly allow me to join the Bank.   |                                   |
| Thanking you,   |                                   |
|   | Yours faithfully,                 |
|   | ( Signature)                      |
|   | e:<br>S/o.W/o.D/o                 |
|   | Address                           |
| Date:   |                                   |

## LETTER OF ACCEPTANCE OF APPOINTMENT IN SARVA HARYANA GRAMIN BANK

The General Manager, Sarva Haryana Gramin Bank, Head Office, SHGB House Plot No.-1 Sector -3, Rohtak Respected Sir,

| '  |  |                             |
|--|--|-----------------------------|
| Ref: Your Letter of Offer for appointment bear dated   | ing No. HO/HRD/                        | /23/                        |
| Reg: Offer of appointment in Sarva Harya of Office Assistant (Multipurpose).   | na Gramin Bank                         | on the post                 |
| I acknowledge your above letter offering me a (Multipurpose) in your Bank.   | ppointment as Of                       | ffice Assistant             |
| I, hereby, accept all the terms and conditions letter, which I have thoroughly read and under the Sarva Haryana Gramin Bank (Office Regulation, 2010 and amendments made the time. | rstood. I also agre<br>ers and Employe | ee to abide by ees) Service |
| I confirm that I shall report at Sarva Haryana C<br>Rohtak on at and shall produ<br>asked by you before I am permitted to join.  |  |                             |
| Thanking you,  |  |                             |
|  | Yours f                                | aithfully,                  |
|  |  |                             |
|  | (                                      | )                           |
| Date:  | Address:                               |                             |
|  |  |                             |
|  |  |                             |

#### Sarva Haryana Gramin Bank, Head Office, Rohtak.

#### Specimen Signature of the Employee

|                            | Date: |
|----------------------------|-------|
| Name of Employee:          | ·     |
| Father's Name:             |       |
| Designation :              |       |
| Date of Joining the Bank : |       |
| Date of Birth :            |       |
| Specimen Signature:        |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |
|                            |       |

\*\*\*\*\*

Unique Id No. \_\_\_\_\_