

CANDIDATES STATEMENT AND DECLARATION

The Candidates must make the statement required below prior to his medical examination and must sign the declaration appended thereto. His / Her attention is specifically directed to the warning contained in the Note below.

Paste your
photograph here

1. State your name in Full (Block Letters)

2. State your age and place of Birth

3. (a) Have you ever had small pox intermittent or any other fever, enlargement or suppression of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis.
(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 afflicted with consumption, scrofula, gout, fits, asthma, epilepsy or insanity?

6. Have you suffered from any form of nervousness due to over work or any other cause?

7. Have you been examined and declared unfit for Government Service by a Medical Officer / Medical Board within the last 03 years.

8. Any other disease diagnosed in past: _____

9. Allergies, if any: _____

10. List of prescribed medication, if any

1. _____
2. _____
3. _____

11. 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	No. of Brothers living, their ages and state of health	No. of Brothers dead, their ages and cause of death
Mother's age if living and State of Health	Mother's age at death and cause of death	No. of Sisters living, their ages and state of health	No. of Sisters dead, their ages and cause of death

12. I declare that all the above statements are true and correct to the best of my belief and knowledge.

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

SIGNATURE OF CANDIDATE_____

SIGNED IN THE PRESENCE LMO/RMO_____

SIGNATURE OF LMO/RMO_____

SEAL_____

Note: The candidate shall be held responsible for the accuracy of the above statements. By wilful suppressing any information he / she will incur the risk of losing the appointments and, if appointed, of forfeiting all claim to superannuation allowance or Gratuity and / or any other action as per rules.