

AppendixAPPLICATION FOR COMPASSIONATE GROUND APPOINTMENTPART-A

- I. (a) Number, Rank and Name of the Government : _____
 Servant (Deceased/Retired on medical ground / Missing)
- (b) Unit last Served : _____
- (c) Designation of the Govt servant : _____
- (d) Date of Appointment : _____
- (e) Date of Birth of the Govt Servant : _____
- (f) Date of Death (if while in service) : _____
- (g) Date of Retirement on medical Ground : _____
- (h) Total Length of service rendered : _____
- (j) Whether permanent or temporary : _____
- (k) Whether belonging to SC/ST/OBC : _____
- II. (a) Name of the Candidate for appointment : _____
- (b) His/Her relationship with the Govt servant : _____
- (c) Date of Birth : _____
- (d) Educational Qualifications : _____
- (e) Whether any other dependent family member : _____
 has been appointed on compassionate ground
- (f) Home Address.
- (i) Village : _____
- (ii) PO : _____
- (iii) Tehsil : _____
- (iv) District : _____
- (v) PIN : _____
- (vi) State : _____
- (vii) Mobile/Phone No and Email ID :
- (g) Post for which applied for :

Contd....2/-

III. Particulars of Total Assets Left including Amount of

- (a) Family pension : _____
- (b) DCR gratuity : _____
- (c) GPF recd at the time of when indl
out from service : _____
- (d) Moveable and Immovable properties : _____
- (e) Dependent family members : _____
- (f) No of unemployed members : _____

IV. Brief particulars of liabilities if any : _____

V. Particulars of all dependent family members of the Govt servant (is some are employed, there Income and whether they are living together or separately)

Ser No	Name(s)	Relationship with the Govt Servant	Age	Address	Employed or not (if employ)
(1)	(2)	(3)	(4)	(5)	(6)

Dated: _____

Signature of the Candidate

Name _____

Address _____

Tele/Mob No . _____

DECLARATION/UNDERTAKING

1. I hereby declare that the facts given by me above are, to the best of my knowledge, correct. If any of the facts here in mentioned are found to be incorrect or false at a future date, my service may be terminated.

2. I hereby also declare that I shall maintain properly the other family members who were dependent on the Government servant/member of the Force as mentioned against **I (a) of Part-A** of the application form and in case it is proved at any time that the said family members are being neglected or terminated.

Dated: _____

Signature of the Candidate

Name _____

Address _____

Tele/Mob No. _____

**COUNTERSIGNED BY GAZETTED OFFICER/
VILLAGE PRADHAN/ SARPANCH**

(Seal and signature)

Dated: _____

**SPECIMEN OF UNDERTAKING CERTIFICATE REGARDING DETAILS OF
COMPASSIONATE GROUND APPOINTMENT GRANTED TO
DEPENDENT FAMILY MEMBERS**

1. I, Mr/Miss/Mrs
son/daughter/wife of Ex No Rank
Name of Assam Rifles have been
applied for Compassionate Ground Appointment rally for the year **2024**.

2. I hereby undertake and certify that the my following family members have already been granted Compassionate Ground Appointment and serving Assam Rifles/Retired from Assam Rifles:-

- (a)
(b)
(c)

OR

(d) No one of my family member is appointed against Compassionate Ground Appointment as on date except me for which I have been applied for Compassionate Ground Appointment rally for the year **2024**.

3. I further undertake that above information are true to the best of my knowledge. In case of above information's are found false at any time even at later stage, department will hold right to dismissed me from service any time with the decision of Assam Rifles Competent authority, and I will refund the Govt expenses partly/wholly as deemed fit by the Department/Government.

Signature of the candidate

Name : _____

Husband/Father's Name : _____

Trade : _____

Vill : _____

PO : _____

Place : _____ Dist : _____

State : _____

Date : _____ Pin : _____

**COUNTERSIGNED BY GAZETTED OFFICER/
VILLAGE PRADHAN/ SARPANCH**

(Seal and signature)

Dated: _____