

TELANGANA PUBLIC SERVICE COMMISSION # HYDERABAD**VETERINARY ASSISTANT SURGEON (CLASS-A) / (CLASS-B)**
IN VETERINARY AND ANIMAL HUSBANDRY DEPARTMENT**NOTIFICATION NO:23/2022 Dated. 22/12/2022****(GENERAL RECRUITMENT)****BASIC INFORMATION DATA: (CHECK LIST)****(To be filled by the candidate)**

TGPSC ID :

REF ID :

HALL TICKET NO :

PASTE TO YOUR RECENT PASSPORT SIZE PHOTOGRAPH
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SIGNATURE

VENUE : **O/o TGPSC, Prathibha Bhavan, Nampally, Hyderabad**DATE OF VERIFICATION:
AND SESSION

01	Name of the Candidate(As per SSC)																		
02	Father's Name																		
03	Mother's Name																		
04	Gender	Male			Female														
05	Date of Birth (As per SSC)	D	D	M	M	Y	Y	Y	Y										
06	(Age as on 01/07/2022)	Years		Months		Days													
		<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> </tr> </table>																	
07	If age relaxation is claimed, specify 1. Retrenched Census Employee 2. Telangana State Govt. Employee 3. N.C.C Instructor 4. SC/ST and BC &EWS. 5. Ex-Service Men	(No. of years claimed for relaxation)				Whether relevant Certificate Produced													
		<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 100px; height: 40px;"></td> </tr> </table>					<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 30px; height: 30px; text-align: center;">YES</td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px; text-align: center;">NO</td> <td style="width: 30px; height: 30px;"></td> </tr> </table>				YES		NO						
YES		NO																	

08	Qualification Prescribed as per Notification (As on 23/12/2022)	Qualification of the Candidate.	Date of Acquiring Qualification by the candidate	Name of the University	Name of the State in which the University is located.						
	PC-01: Bachelor's Degree in Veterinary Sciences and Animal Husbandry or its equivalent. PC-02: Bachelor's Degree in Veterinary Sciences and Animal Husbandry or its equivalent and PG Degree / Diploma in Microbiology / Parasitology/ Epidemiology/ Virology/ Immunology/ Pathology or M.V.Sc. with Biotechnology or Veterinary Public Health										
09	Community (Integrated Community Certificate Issued by Tahsildar for SC/ST/BC& EWS from Telangana Govt)	OC	SC	ST	EWS	BC					
						A	B	C	D	E	
		Official use:									
10	BC Candidates should submit Non-Creamy Layer certificate (Annexure-II Form VII-B) as per G.O.Ms.No.8, B.C. Welfare (OP) Dept, Dt: 13-11-2014, Memo No.3009/BCW/OP/2011, Dt:18/12/2015 and G.O.Ms. No:20 of 2017	Whether Non-Creamy Layer certificate produced	YES			NO					
11	Candidates claiming EWS Reservation as per G.O.Ms.No.243 & 244 GA (SER.D) Dept., Dt. 24/08/2022 for theyear 2021-2022	Mee Seva/Online EWS Certificate for the Financial Year 2021-2022 furnished	Mee Seva / Online Date of issue of EWS Certificate for the Financial Year 2021-2022								
		YES	NO								
12	Do you belong to PWD category, if yes mention Disability and percentage	VH	%	HH	%	OH	%	MH	%		
13	Is the Candidate claiming any Sports reservation, if yes, give details	Details of Sports Certificates									

14	Indicate the evidence (Original Study Certificate to be produced)	CLASS	Year	District	State	Date of issue of Study / Residential Certificate
	OR Residence Certificate for 7 years Prior to 7 th Class, if private Study.	Class – I				
		Class - II				
		Class - III				
		Class - IV				
		Class - V				
		Class - VI				
		Class - VII				
15	Multi-Zone to which you belong			Other than Telangana		
16	Do you belong to Ex- Servicemen	Yes		No		
	If 'Yes', give details and enclose certificate.					
17	Present Employment details (Government Employees should submit NOC)					
18	Whether exercised WebOptions	Yes		No		
19	<u>Declaration</u>					
	I hereby declare that					
	i) All the columns filled in by me containing my biodata and other particulars, are true to the best of my knowledge.					
	ii) The certificates such as, educational qualification, community certificate, dates of birth (SSC), study/residence in support of my claim for local candidature are genuine.					
	iii) I did not resort to any irregular or improper means in connection with my candidature for selection.					
	iv) I am liable for permanent debarment from appearing for the recruitment to be conducted by TGpsc and other PSCs and also criminal prosecution, if I am found to be involved in any unfair means / malpractice.					
	v) I further declare that the information furnished by me is correct and my candidature shall be cancelled at any stage if it is found incorrect.					
	Address.					
					
					
					
	Mobile No					
	Place:					
	Date: -07-2024					
	Signature of the candidate.					

TO BE USED FOR ADMISSION (OFFICIAL USE)

The Candidate is Admitted for further process of selection, since he/she possess all qualifications as per Notification.

A.S. O**SECTION OFFICER****ASST. SECRETARY****DEPUTY SECRETARY****TO BE USED FOR REJECTION**

The Candidate is Rejected for further process of selection because of the following reason.

i).**ii).****iii).****iv).****A.S. O / SECTION OFFICER****ASST. SECRETARY****DEPUTY SECRETARY**

DECLARATION BY THE UN-EMPLOYED WHO CLAIM FEE EXEMPTION

1. Name of the Candidate :

2. Father's Name :

3. Date of Birth & Age :

4. Centre for Written Examination

5. Full Postal Address :

I hereby declare that I am not working in any Government Department / Quasi Government / Public Sector / Private Sector.

I further declare that the information furnished by me is true and correct and my candidature shall be cancelled at any stage if it is found incorrect.

PLACE:

DATE: /07/2024

FULL SIGNATURE OF THE CANDIDATE.
(Declaration not signed by the candidate will be rejected)

ATTESTATION FORM

(THE CANDIDATES SHOULD PROPERLY FILL THE ATTESTATION
FORM WITH HIS/HER OWN HAND WRITING)

Latest colour
passport size
Photograph of
the candidate

**Name of the
Department**

**Name of the Head
of the Dept.**

1. (a) Name in full (capital letters only with aliases, if any. Please indicate if you have added / dropped at any stage any part of your name/surname.

SURNAME

NAME

- (b) Designation of the candidate with category (Appointment by Direct Recruitment/Ex- Servicemen quote/compassionate ground)
Enclose supporting certified copies of the documents

(i) Designation

(ii) Place of Working

(iii) Direct recruitment

Ex-Serviceman

Compassionate

2. Details of addresses:

a. Present

b. Permanent

House/Apartment/Flat No.

Name of Apartment

Lane Name

Street & Road

Village

Mandal / Taluk

Town / City

District

State

Pin Code

Contact Phone Numbers

Mobile	Landline Office (with STD Code)	Landline Residence (with STD Code)

(c) If originally a resident Of Pakistan, the address in that Dominion and the date of migration to Indian Union

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3. Particulars of places where you have resided during the *preceding five years* from the date of filling up if Attestation From.

	From (Month / Year)	To (Month / Year)	Residential Address in full (i.e., House / Apartment / Flat Number) (Apartment/Complex/Lane/ Street/Colony and Road, Village,Mandal and District/City)	Police station and District
1				
2				
3				
4				
5				

4. Father's details:

(a) Name in full with aliases, if any

--

(b) Profession

--

(c) If in service, give designation and official address

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(d) Present postal address (if dead, give last address

House No.	
Lane Name	
Street & Road	
Village/Mandal	
Dist	
State	
Pin Code	

(e) Permanent House Address

House No.	
Lane Name	
Street & Road	
Village/Mandal	
Dist	
State	
Pin Code	

5. (i) Nationality of :

(a) Father

(b) Mother

(c) Wife / Husband

(ii) Place of Birth of Wife / Husband**6. (a) Date of birth of the applicant**

(b) Present Age

(c) Age at SSC / Matriculation

7. (a) Place of birth, District and State

(b) District and State to which you belong

8. (a) Religion

(b) Are you member of Scheduled Caste / Scheduled Tribe / Backward Class?

Scheduled Caste

Scheduled Tribe

Backward Class

Please specify the Class / Tribe Grade A,B,C,D & E

9. Educational Qualifications showing places of education with years in schools and colleges since 15th year of age (Please enclose certified copies of Study Certificates and indicate whether study is regular or distance / correspondence).

Course	Name of the School / College with full address (Village / Mandal / District / City)	Date of entering (mention month & year)	Date of leaving (mention month & year)	Examination passed with Reg.No.etc. (Name of the group i.e., Inter/Degree/ Diploma/ PG,etd)	Police Station and District
1. SSC/ Matriculation					
2. Intermediate Diploma					
3. Graduation/ Professional Course					
4. Post Graduation					
5. Any other qualification					

10. If you have at any time been employed, give details, (Please enclose certified copies of the documents).

Designation of Post held or description of work	Period		Full Address of the Office, Firm or Institution	Have you been at any time dismissed / removed from service / resigned to the post? If so, please give details.
	From	To		

11. Have you ever been arrested by the police, convicted by a Court of law or detained under any state /central preventive detention laws for any offence? Whether such conviction sustained in the Court of Appeal or set aside by the Appellate Court if appealed against.

(Note: If detailed, convicted, debarred etc. subsequent to the completion and submission of this form, the details should be communicated immediately to the concerned Department or the authority to whom the Attestation Form has been sent earlier, as the case may be, failing which it will be deemed to be suppression of factual information). If the answer is 'Yes', the full particulars of the conviction, sentences and detention should be given.

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12. Name and complete address of two responsible persons of your locality to whom you are known or two referees to whom you are known. (Persons shall not be blood relatives).

	Referee-1	Referee-2
Name	<input type="text"/>	<input type="text"/>
H.No./Plot No.	<input type="text"/>	<input type="text"/>
Name of Apts./ Complex	<input type="text"/>	<input type="text"/>
Street & Road	<input type="text"/>	<input type="text"/>
Village	<input type="text"/>	<input type="text"/>
Mandal/Taluk	<input type="text"/>	<input type="text"/>
Town/City	<input type="text"/>	<input type="text"/>
District	<input type="text"/>	<input type="text"/>
State	<input type="text"/>	<input type="text"/>
Pin Code	<input type="text"/>	<input type="text"/>

13. Have you ever been member/worker of any Political Party or Communal organization/Youth/Student/Service/Labour? If so furnish details

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DECLARATION SHOULD BE SIGNED BY THE CANDIDATE

1. I here declare that the statements made in this form are true to the best of my knowledge and belief.
2. I am married/unmarried and have only one wife living (delete which is not applicable).
3. I am fully aware that furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification and is likely to render me unfit for employment under the Government.
4. I am also fully aware that if it comes to notice at any time during my service that false information has been furnished or that there has been suppression of factual information in the Attestation Form, my services would be liable to be terminated solely on this ground.

Date:

Signature of Candidate

Place:

**CERTIFICATE TO BE SIGNED BY A GAZETTED OFFICER OR MEMBER OF
LEGISLATURE OR OTHER AUTHORITY AS PRESCRIBED BY THE APPOINTING
AUTHORITY**

Certified that I have known Sri / Smt / Kum. _____

_____ Son / Daughter / Wife of _____

For the last _____ years _____ months and to the best of my knowledge and belief,
the particulars furnished by him / her are correct.

Date:

(Signature)

Name & Designation with Seal

Place:

Photograph of the
candidate attested
by Gazetted Officer
/ MLA / other with
seal Competent
Authority



TSGGDF

**GOVERNMENT OF TELANGANA
REVENUE DEPARTMENT**

Application No

EWS

Date : ____ / ____ / ____.

INCOME CERTIFICATE FOR ECONOMICALLY WEAKER SECTIONS VALID FOR THE YEAR 2022-2023

This is to certify that Shri/Srimathi/Kumari _____ S/o / D/o / W/o _____ Permanent resident of _____ Village / Town _____ Post Office _____ District _____ in the State/ Union Territory **Telangana** PIN Code _____ whose photograph is attested below belongs to Economically Weaker Sections, since gross annual income* of his/her 'family'*** is below Rs.8 lakh (Rupees Eight Lakh Only) for the financial year **2021-2022**.

Shri/Srimathi/Kumari _____ belongs to the _____ caste which is not recognized as Scheduled Caste, Scheduled Tribe and Other Backward Class (Central List).

Certified By

Photograph of the applicant

Name :

Designation :

Mandal :

District :

***Note** : Income covered all the sources i.e, salary, agriculture, business, profession etc..,

****Note**: The term "**Family**" for this purpose include the person, who seeks benefits 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.

FORM FOR COMMUNITY, NATIVITY AND DATE OF BIRTH CERTIFICATE

Serial No.

S.C.

Seal of the

District Code:

S.T

Issuing

Mandal Code :

B.C

Office

Village Code :

Certificate No:

COMMUNITY, NATIVITY AND DATE OF BIRTH CERTIFICATE

(1) This is to certify that Sri/Smt./Kum. _____
 Son/Daughter of Sri _____ of Village/Town
 _____ Mandal _____ District _____ of the
 State of Telangana belongs to _____ Community which is recognised as (*)
 S.C./S.T./B.C. sub-group _____

The Constitution (Scheduled Castes) Order, 1950 The
 Constitution (Schedule Tribes) Order, 1950

G.O.Ms.No:1793, Education, dated: 25.9.1970 as amended from time to time (BCs.) / S.Cs.
 S.Ts. list (modification) Order, 1956 S.Cs. And S.Ts. (Amendment) Act, 1976.

(2) It is certified that Sri/Smt./Kum. _____ is a native
 of _____ Village/Town _____ Mandal _____ District of Telangana.

(3) It is certified that the place of birth of Sri/Smt./Kum.
 _____ is _____ Village/Town _____ Mandal
 _____ District of Telangana.

(4) It is certified that the date of birth of Sri/Smt./Kum.
 _____ is _____ Day _____ Month _____ Year
 _____ (in words) _____ as per the declaration given by his/her
 father/mother/guardian and as entered in the school records where he/she studied.

Signature: Date:
 Name in Capital Letters: Designation:
 (Seal)

Explanatory Note:- While mentioning the community, the Competent Authority must mention the sub-caste (in case of Scheduled Castes) and sub-tribe or sub-group (in case of Scheduled Tribes) as listed out in the S.Cs. and S.Ts. (Amendment) Act, 1976.

ANNEXURE-II
FORM – VII B

Serial No.

District Code:

BC-A/B/C/D/E

Emblem

Mandel Code:

Certificate No.

Village Code:

CREAMY LAYER / NON – CREAMY LAYER (Strike off whichever is not applicable)
CERTIFICATE FOR BACKWARD CLASSES GROUPS-A, B. C. D & E APPLYING FOR
APPOINTMENTS TO CIVIL POSTS AND SERVICES
WITHIN THE TELANGANA

This is to certify that Shri/Smt/Kumari _____ son / daughter of _____
_____ Village/Town _____ Door
No. _____ Street Name. _____ in the _____ Taluka
in _____ Mandal _____ in the Telangana State
belongs to _____ community _____ Religion which is recognised
as a Backward Class under Group _____ at Sl.No. _____ in the State of Telangana
vide G.O.Ms.No.34, BC Welfare (OP) Dept., Dt: 08.10.2015. This is also to certify that he /
she does / does not belong to (Strike off whichever is not applicable) the persons / sections
(Creamy Layer) mentioned in column - 3 of the schedule to the Government of India,
Department of Personnel & Training O.M.No.36033/1/2013-Estt. (Res), dt: 13.10.2017 adapted
by Government of Telangana vide G.O.Ms.No.20, BC Welfare (OP) Dept., dt: 31-10-2017.

(Seal)

ISSUING AUTHORITY *

Signature:

Date:

Name in Capital Letters:

Designation:

SCHOOL STUDY CERTIFICATE

NOTE: Should be obtained from the Head of Educational Institution(s).

1. Name of the Candidate :

2. Father's Name :

3. Date of Birth & Age :

4. Place of Birth :

Class	Name and Place of School	District	Duration of Study giving month and year
I			
II			
III			
IV			
V			
VI			
VII			

STATION:

DATE:

Signature of the Head of the
Educational Institute(s)

SEAL OF THE INSTITUTION

CERTIFICATE OF RESIDENCE

In case where during the whole or any part of the four consecutive academic years ending with the academic year in which he appeared or as the case may be first appeared for the relevant qualifying examination he has not studied in any educational institution, if he has resided in that local area for a period of not less than four years immediately preceding the date of commencement of the qualifying examination in which he appeared, or as the case may be, first appeared.(G.O.Ms.No.124, GENERAL ADMINISTRATION (SPF-MC) DEPT, Dated :30.08.2018)

It is hereby certified.

(a) That Sri/Smt./Kum _____
 _____ S/o. W/o. D/o _____ appeared for the first
 time for the 7th class Examination in
 _____(Month)_____ (Year).

Sl.No.	Village	Mandal	District	Period
1.				
2.				
3.				
4.				
5.				
6.				
7.				

OFFICE SEAL:

STATION:

DATED:

Officer of Revenue Department
 not below the rank of Mandal
 Revenue Officer holding
 independent Charge of a Mandal.

* STRIKE OFF "WHOLE"/PART AS THE CASE MAY BE.