

**PROFORMA REGARDING EMPLOYMENT OF DEPENDENTS OF
GOVERNMENT SERVANTS DYING WHILE IN SERVICE/RETIRED ON
INVALID PENSION**

FORM-1

PHOTOGRAPH
(ATTESTED BY
DEPTT.)

PART – A

- I (a) Name of the Government Servant
(Deceased/ retired on medical grounds.) :
- (b) Designation of the Government servant :
- (c) Date of birth of Deceased/ retired on
medical grounds Govt. Servant :
- (d) Date of Superannuation of Deceased/
retired on medical grounds, Govt. Servant :
- (e) Whether Group 'D' or Not? :
- (f) Date of Death/retirement on Medical
grounds :
- (g) Date of initial appointment in Government
service in r/o Deceased/ retired on medical :
- grounds Govt. Servant.
- (h) Total length of service rendered :
- (i) Whether permanent or temporary :
- (j) Whether belonging to SC/ST/OBC :
- II (a) Name of the candidate for appointment :
- (b) His/Her relationship with the Government :
Servant :
- (c) Marital status of the applicant :
- (d) Date of birth :
- (e) Educational qualification
General :
- Technical :
- (f) Whether any other dependent family
member has been appointed on :
- compassionate grounds.
- (g) Height of the applicant :

- III Particulars of total assets left including amount of: :
- (a) Family pension :
- (b) D.C.R. Gratuity :
- (c) G.P.F. Balance :
- (d) Life Insurance policy (including postal life insurance) :
- (e) C.G.E. Insurance amount + Saving Fund :
- (f) Encashment of leave :
- (g) Income from other sources, if any :
- (h) Amount of DLIS :
- Total :

- IV (a) Movable and immovable properties in the name of deceased government servant or any member of family, in Delhi or outside Delhi:

Sl. No.	Property	Details of Property	Value (as per circle rate/Market rate)
a)	Moveable (Cash, Jewelry, Share Certificate, Vehicle etc.)		
b)	Immovable property (Flat/House/Plot etc.)		
c)	Agricultural Land		
d)	Total Value		

- (b) If yes, annual income earned and details thereof.

- V Brief particulars of liabilities, if any :
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- VI Residence particulars & Address : Rented / Own House / Govt. Accommodation (Enclose proof)

Address

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Contact No.

VI	Particulars of all dependent family members of the Government servant (If some are employed, their income and whether they are living together or separately. In case dependent is PH attach self attested copy of disability certificate)					
SL NO	NAMES	RELATIONSHIP WITH THE DECEASED GOVT. SERVANT	DATE OF BIRTH	ADDRESS	EMPLOYED OR NOT (IF EMPLOYED PARTICULARS OF EMPLOYMENT AND EMOLUMENTS)	MARITAL STATUS
1	2	3	4	5	6	7
1						
2						
3						
4						
5						

VI (a) No. of divorcee dependent daughter (s), if any:

VII

DECLARATION/UNDERTAKING

- 1 I hereby declare that the facts given above, to the best of my knowledge, are correct. If any of the facts herein mentioned are found to be incorrect or false, at a future date, my services may be terminated *and I would be prosecuted under section 177, 193, 197, 198, 199 & 200 of IPC.*
- 2 I hereby also declare that I shall maintain properly the other family members who were dependent on the Government servant/member of the Armed Forces mentioned against I (a) of Part-A of this form and in case it is proved at any time that the said family member are being neglected or not being properly maintained by me, my appointment maybe terminated

Date

Signature of the Candidate

Name

Address

Contact No.

& email ID (if any)

Post Office

Tehsil/ Sub-division

District

State/Pin code

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I have verified that the facts mentioned above by the candidate are correct.

Date

Signature of the welfare Officer of the
Department with office stamp/seal

Name
Address

Enclosures:

1	Death Certificate (in original)
2	Copy of certificates as proof of Educational qualification & experience, (Self attested)
3	Proof of Age/DOB of applicant & other family members (Self Attested)
4	In case of candidates belonging to reserved category, self attested copy of Caste Certificate.
5	In case of candidate/dependent belongs to PH category, self attested copy of disability certificate.
6	Details of family (as per Form-3)/Copy of ration card (Self Attested)
7	Copies of orders of all pension benefits i.e. GPF/CPF, CGEIS (including saving fund), PPO, DLIS, Leave Encashment, Savings and any other amount sanctioned by the Government/Department (Self Attested duly verified by administrative department concerned)
8	NOC from other dependent members of family (Self attested declaration/undertaking)
9	Two Photographs of applicant. (Attested by the Department)
10	Rent agreement, Rent receipt and proof of ownership of Landlord of last quarter if applicable.

**NOTE: FURNISHING OF WRONG / FALSE INFORMATION /
CERTIFICATE IS PUNISHABLE UNDER SECTION 177,
193, 197, 198, 199 & 200 OF IPC**

PART –B

(TO BE FILLED BY THE OFFICE IN WHICH EMPLOYMENT IS PROPOSED)

- 1
 - (a) Name of the candidate for appointment
 - (b) His/Her relationship with the Government servant
 - (c) Age (date of birth), educational qualification and experience if any
 - (d) Post for which employment is proposed and whether it is Group 'C' or 'D'
 - (e) Whether there is vacancy in that post within the ceiling of 5% prescribed under the scheme of compassionate appointment.
 - (f) Whether the post to be filled is included in the Central Secretariat Clerical service or not
 - (g) Whether the relevant Recruitment Rules provide for direct recruitment
 - (h) Whether the candidate fulfils the requirements of the Recruitment Rules for the post
 - (i) Apart from the waiver of employment exchange/Staff Selection Commission procedure what other relaxations are to be given
- II Whether the facts mentioned in Part-A have been verified by the office and if so, indicate the records
- III If the Government Servant died/retired on medical ground more than 5 years back, *reasons for delay* in submission of case be provided.
- IV Personal recommendation of the *Head of the Department* in the Ministry/Department/Office

SIGNATURES OF HEAD OF DEPARTMENT
WITH OFFICE SEAL