

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

Dated: 27.04.2018

Dear Candidates,

We have pleasure in informing you that you have been selected in Malwa Gramin Bank for the post of Officer Scale-I. We have already dispatched your appointment letter to your address. You have to report for joining at Malwa Gramin Bank Head office, Sangrur on dates mentioned in your appointment letter. We are enclosing herewith specimen performs you have to submit at the time of joining along with papers mentioned in your appointment letter. Please take care of following points while filling the documents:-

- 1. Please take print on Legal paper (set the size of paper on 'Legal' while taking print).**
2. Medical certificate (from page No.2 to 7) must be issued by the Civil Surgeon of district to which you belong **OR** Civil Surgeon Sangrur. Please ensure the medical certificate has been issued by the competent Authority as prescribed under his full signatures and **Seal (Stamp)**.
3. Attestation form (from page no. 8 to 10) must be in Triplicate. (i.e. three identity certificate (page 10) must be from the same officer)
4. To furnish names of two respectable persons, one of which should necessarily be Gazetted Officer or an officer of the Bank, preferably known to the Bank and not related to you for reference. (Performa Attached at page no 19)
5. Guarantee Bond Undertaking (page no. 21) must be on Non Judicial Stamp Paper of Rs.100/- duly attested by the Notary Public. Guarantor must have sufficient means to stand guarantor and must not be related to you. Submit ID proofs of Guarantors.
6. If you are registered with Employment Exchange bring your registration card of Employment Exchange.
7. If you are presently in the service of Government or Public Sector Undertaking or Government Undertaking/Corporation or any other Organisation, you will have to resign from your present employment and submit a satisfactory discharge certificate at the time of joining duty.
8. Assets & Liability statement is available on Bank's website www.malwagraminbank.com
9. Submit self-attested Photocopies of all testimonials and certificates for our record.
10. Please bring all the papers mentioned in your appointment letter

Please send your acknowledgement of receipt of appointment letter and agree to the terms and conditions of the offer made therein.

With Warm Wishes

General Manager

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

Personal statement of the candidate

To be filled in by the candidate
Before presenting the form to medical officer

1. Name in Full : _____
(Surname first)

2. Category of Post : Officer Scale-I

3. Address : _____

: _____

: _____

4. Date of Birth : _____

5. Married/Single : _____

6. Personal History

A. History of Bleeding from Gastro-Intestinal Tract Gastro or Duodenal Ulcers, Appendicitis, Internal Piles, Fistula, Typhoid, Jaundice etc. Give details: -

B. History of Asthma, Tuberculosis, Spitting of Blood, Pleuresy, Breathlessness, etc. Give details:

C. History of palpitation, Fainting Spells, Pain in the chest, Breathlessness on Exertion, Cyanosis, Rheumatic fever with joint pains, Swelling of legs/face etc. give details:

D. History of Bleeding Urinary Tract, Painful urination passing of stones or gravel in Urine etc. Give details:

E. History of Fits, Paralysis, Neuras, Thenia, Nervous Break down etc. Details to be given:

F. History of Leprosy extensive generalised allergice dermatitis, Leucodorma, Venereal disease etc. Give details:

G. Have you suffered from defect hearing or eye sight? Give details:

H. Details of serious illness/ injuries sustained by accident or otherwise. Give details:

I. Details of surgical operations undergone:

J. Is there any other item of your medical history which you have not already mentioned?

7. Family History

- i. Heart disease & Hypertension _____
- ii. Tuberculosis _____
- iii. Kidney disease _____
- iv. Cancer _____
- v. Any other serious ailments _____

8. For female candidates only

- i. Mensutrial History : Regularly/ Blood History
- ii. Date of L.M.P. : _____
- iii. Any evidence of pregnancy : _____
- iv. History of disease of Uterus, : _____
Cerviz, Ovaries of Breasts

I hereby declare that the above statements are correct to the best of my knowledge and that any incorrect/supressed information will render me liable for termination of my service in the bank.

Place: _____ (Signature/thumb impression
Date: _____ of the candidates)

Signed in my Presence

Signature of the Medical Examiner

Contd.....3.....

NOTE:

The candidate may please note that they would have no right to appeal against the decision of the Medical Examiner. If, however, the Bank is satisfied on the basis of the evidence produced before it, of the possibility of an error of judgment in the decision of the Medical Examiner it is open to the Bank to allow an appeal to a Medical Board which shall be constituted by the Bank. Such evidence should, however, be submitted by the candidate within one month of the date of communication in which the decision of the Medical Examiner is advised to him/her. If the setting up of the Medical Board is decided by the Bank, the candidate will be called upon to deposit the requisite amount for the purpose. If found medically fit by the Board, this deposit would be refunded to the candidate, otherwise it will be forfeited. The report of the Medical Board is final and will not be subject to review by any other specialist penal of Board.

Report of the Medical Examiner

Name of the candidate: _____

Category of the post: Officer Scale-I

1. General Development: Good _____ Fair _____ Poor _____

Nutrition Thin _____ Average _____ Obese _____

Best weight _____ when _____ Any

recent change in weight _____

Temperature _____

Girth of chest:-

i. After full inspiration

ii. After full expiration

2. Skin: Any obvious disease:-

1. Eyes

a. Whether the vision is normal Yes/No

If not, is it capable :

of being corrected to 6/6 with Yes/No
glasses (Not with contact lenses)

b. If the candidate was referred to an eye
surgeon what are surgeons observations
in respect of the followings:

- i. Any Disease
- ii. Night blindness
- iii. Defect in colour vision
- iv. Field vision
- v. Visual Acuity
- vi. Fundus examination

Acuity of vision Naked eyes with glasses strength of glasses
Sph. Cyl. Axis

Distant Vision

R.E

L.E

Near vision
R.E.
L.E.

Hypermetropis
(Manifest)
R.E
L.E

4. Ear Inspection

Hearing : Right Ear -----

Left Ear -----

5. Glands _____ Thyroid _____

6. Condition of Teeth _____

7. Respiratory System

Does physical examination reveals anything abnormal in the respiratory organs?

If yes, explain fully -----

8. Circulatory System:

a. Heart: Any organic Lesions _____

Pulse Rate: _____

b. Blood Pressure _____

Systolic _____

Diastolic _____

9. Abdomen: Girth _____ Tenderness _____

_____ Hernia _____

a. Palpable: Liver _____ Spleen _____

Kidney _____ Tumors _____

b. Hemorrhoids _____ Distula _____

10. Nervous System: Indication of nervous or mental disabilities _____

11. Loco Motor System : Any abornamility _____

12. Genito Urinary System : Any evidence of Hydrocele Varielle etc. _____

Urine analysis

a) Physical appearance (b) Sp. Gr

(c) Albumin (d) Sugar

(e) Casts (f) Cells

11. Report of X- Ray examination of chest:-

11. Report of the Blood examination :

11. Is there anything in the health of the candidate likely to render him/her unfit for the efficient discharge of his/her duties in the service for which he/she is candidate?

16. The Medical Examiner should record the finding under one of the following categories:-

- i. Fit
- ii. Unfit on account of

Signature of the Medical Examiner

()

Place : _____ Name _____

Date: _____ Designation _____

MALWA GRAMIN BANK**ATTESTATION FORM**

Passport Size Photo

1.	Name in full (in block letters) with aliases, if any (please indicate if you have added or dropped at any stage any part of your name or surname)			
2.	Present address in full (i.e. village, Thana and District, or House Number, Lane/Street/ Road and Town)			
3.	a. Home address in full (i.e. village, thana and Distt. or House Number, Lane/Street/ Road and Town and Name of Distt. Head Quarter) b. If originally a resident of Pakistan, the address in that country and the date of migration to Indian Union.			
4.	Particulars of places (period of residence where you have resided for more than one year at a time during the preceding five years. In case of stay abroad (including for more than one year after attaining the age of 21 years should be given).			
	From	To	Residential address in full i.e. village, Thana and Distt. House Number, Lane/Street/ Road and Town	Name of the Distt. Headquarters of the place mentioned in the preceding column
5.	a. Father's name in full with aliases, if any. b. Present Postal Address c. Permanent Home Address d. Profession. e. If in service give designation and official address.			
6.	i. Nationality of a. Father b. Mother c. Husband/ Wife c. Candidate ii. Place of birth of Husband/ Wife a. Name in full with aliases, if any. b. Profession & Designation with official address if in service.			
7.	a. Date of birth b. Present age c. Age of Matriculation			
8.	a Place of birth, Distt. & State in which situated b. Distt. and state to which you belong.			

9.	a. Your religion b. Are you a member of a Scheduled Caste/ Scheduled Tribes				
Answer 'Yes' or 'No' and if the answer is 'Yes', state the name thereof.					
10.	Education qualifications showing place of education with years in Schools & Colleges since 15 th years of age				
	Name of School/ College with full address	Date of entering	Date of leaving	Examination passed	
11.	If you have, at any time been employed, give details: -				
	Designation of post held or description	Period		Full address of office firm or institution	Full reasons for leaving the previous service
		From	To		
12.	Have you ever been prosecuted, kept under detention or bound down/ fined, convicted by a court of law of an offence or debarred or disqualified by any public service commission from appearing at its examination/ selections? Is any case pending against you in any court of law at the time of filling up this attestation form? If the answer is 'Yes' full particulars of the case detention, fine, conviction, sentence etc. should be given:				
13.	Names and addresses of two responsible persons of your locality or two references to whom you are known:				
	(1)	(2)			
	_____	_____			
	_____	_____			
	_____	_____			
I certify that the above 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.					

(Signature of the candidate)

Date: _____

Place: _____

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 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 services would be liable to be terminated

(Signature of the candidate)

Identity Certificate

(Certificate to be signed by any one of the following)

1. Gazetted Officer of Central or State Government;
2. Members of Parliament or State Legislature;
3. Sub-Divisional Magistrate/ Officers;
4. Tehsildars or Naib/ Deputy Tehsildars authorized to exercise magisterial powers;
5. Block Development Officers;
6. Principals and Head Masters of all recognized institutions;
7. Post Masters;
8. Panchayat Inspectors;

It is certified that I know Sh./ Smt./ Kumari _____ S/o D/o
W/o Sh. _____ for the last _____ years _____
months and it is further certified that to the best of my knowledge and belief the
particulars furnished by him/ her are correct.

Signature _____

Designation or status and address

Place :

Date:

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

SCHEDULE - II
(See Regulation 19)

Place _____

Date _____

Declaration of Fidelity and Secrecy

I, _____ do hereby declare that I will faithfully, truly and to the best of my skill and ability execute and perform the duties required of me as Officer or employee of the Malwa Gramin Bank and which properly relate the office or position held by me in the said Bank.

I further declare that I will not divulge or allow to be divulged to any person not legally entitled thereto any information relating to the affairs of the said Bank or to the affairs of any person having any dealing with the said Bank and nor will I allow any such person to inspect or have access to any books or documents or electronic records belonging 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: Officer Scale-I

Signed before me

Signature _____

Name in full _____

Designation _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

Care (to be on the lines of GOI Rules)

SCHEDULE - II
(See Regulation 5(4)(ii))

Declaration to be obtained from every officer or employee on first appointment

I _____ S/o, W/o,
D/o Sh. _____ declare as under: -

- (1) That I am unmarried/a widower/a widow.
- (2) That I am married and have only one spouse living.
- (3) That I have entered into or contracted a marriage with a person having a spouse living.

Application for grant of exemption is enclosed.

2. I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date: _____ Signature _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

SCHEDULE - III

Declaration of Domicile

(See Regulation 73)

Place.....

Date.....

1. The undersigned having been appointed in the service of the Malwa Gramin Bank 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 domicile for the reasons given below: -

Name in full : _____

Designation and

Nature of appointment : Officer Scale-I

Date of appointment : _____

Signature : _____

* Strike out whichever is not applicable.

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR
FORM 'A'

(See Regulation 18)

Declaration to be bound by the

Place: _____

Malwa Gramin Bank (Officers and Employees)

Date : _____

Service Regulations, 2010

I hereby declare that I have received, read and understood Malwa Gramin Bank (Officers & Employees) Service Regulations, 2010 and I hereby subscribe and agree to be bound by the said Regulations.

Signature _____

Name in full _____

Designation: Officer Scale-I

Signed before me

Signature _____

Name in full _____

Designation _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

Form 'B'

Declaration to be obtained from new entrants regarding registration with Employment Exchanges

I, _____ S/o D/o W/o Sh. _____ declare that I am registered with employment exchange _____ and I hereby attach my employment exchange registration card, in original.

OR

I, _____ S/o D/o W/o Sh. _____ declare that I have not got myself registered with any employment exchange in India and as such not in a position to submit employment exchange card.

2. I solemnly affirm that the above declaration is true and I understand that in the event of declaration to be found incorrect after my appointment, I shall be liable to be dismissed from service.

Date: _____

Signature _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

Form 'C'

I, _____ S/o D/o W/o Sh. _____ aged
about _____ resident of _____, do hereby declare
that:

1. No criminal proceeding is pending against me.
2. I have neither been convicted nor been declared bankrupt by a competent court.
3. I have not been dismissed/ discharged by the previous employer, if any.

Date: _____

Signature _____

Form 'D'

The Chairman,
Malwa Gramin Bank,
Head Office,
Prem Basti Road,
Sangrur

I hereby certify that I am not directly or indirectly connected with any trade or business and I undertake that I shall not, so long as I remain in the service of the Bank, engage myself in any trade or business directly or indirectly.

Yours faithfully,

(Signature)

Place:

Date:

Form - E

The Chairman,
Malwa Gramin Bank,
Head Office,
Prem Basti Road,
Sangrur

I hereby undertake that I have joined/ shall join the service of the Malwa Gramin Bank as an Officer and shall continue to serve the Bank. I shall not be entitled to apply for or to accept the offer of any other appointment or appointments, while I am in service of the Bank, without the knowledge and permission in writing of the Malwa Gramin Bank, which permission may be withheld without assigning any reason.

Yours faithfully,

(Signature)

Place:

Date:

Malwa Gramin Bank
Head Office, Sangrur

Form 'F'

I, _____ S/o D/o W/o Sh. _____
resident of _____, do hereby declare that following members of
my family are dependent on me:

Sr No. Name Relation

- 1.
- 2.
- 3.
- 4.
- 5.

Date

Signature

Reference Letter

I _____ S/o Sh. _____
resident of _____ know Sh./ Ms. _____
_____ S/o D/o Sh. _____ resident of
_____ for the last _____ years and
_____ months. Sh./ Ms. _____ bears good moral character.

Signature _____

Name and _____

address of _____
the referee _____

Place:

Date:

Reference letter

I _____ S/o Sh. _____
resident of _____ know Sh./ Ms. _____
_____ S/o D/o Sh. _____ resident of
_____ for the last _____ years and
_____ months. Sh./ Ms. _____ bears good moral character.

Signature _____

Name and _____

address of _____
the referee _____

Place:

Date:

Malwa Gramin Bank
Head Office, Sangrur

The Chairman,
Malwa Gramin Bank,
Head Office,
Prem Basti Road,
Sangrur

Dear Sir

UNDERTAKING REGARDING GUARANTEE BOND

I _____ S/o,

W/o, D/o Sh. _____ undertake

to serve the Malwa Gramin Bank for a minimum probation period i.e. for two years. In the event of resigning from the Malwa Gramin Bank before the expiry of the probation period, I will pay liquidated damages of Rs. 1,00,000/- (Rs. One lakh only) towards partial cost of training/ other Misc. Expenses. Therefore, for this purpose, a stamped Bond duly Executed by two sureties of sound financial standing good for an amount equivalent to Rs. 1,00,000/- (Rs. One lakh only) is enclosed.

I also understand that the above said amount of Rs. 1,00,000/- (Rs. One Lakh only) will be in addition to the compensation to be paid to the Bank, equal to my pay for the period of one month notice, which is required to be given by me, in case I wish to leave or discontinue the Bank's service.

Yours faithfully,

(Signature)

Place:

Date:

(On stamp paper attested by notary, Guarantor should have sufficient means to stand guarantor but must not be relative of candidate. Enclose ID proofs of Guarantors)

Place: _____

Dated: _____

The Chairman,
Malwa Gramin Bank,
Head Office, Prem Basti Road,
Sangrur

Dear Sir

UNDERTAKING

Malwa Gramin Bank, Head Office, Sangrur (hereinafter called as Bank) has appointed Sh./Ms/Mrs. _____ S/o d/o w/o Sh. _____ resident of _____ as an Officer Scale-I vide appointment letter No. MGB/13/Staff _____ dated _____. As per terms and conditions of the appointment letter he/she is required furnish guarantee bond of Rs. 1,00,000/- (Rs. One lakh only) along-with two sureties in the event of submission of resignation by him/her before completion of probation period, i.e., two years.

2. In case I choose to resign before completion of probation period, I _____ (name of Officer Scale-I) undertake to deposit a sum of Rs. 1,00,000/- (Rs. One lakh only) in addition to the compensation to be paid to the Bank in lieu of notice period, alongwith my resignation.

3. In case Sh./Ms/Mrs. _____ (name of Officer Scale-I) resigns from the service of the Bank before completion of probation period of two years and fails to deposit aforesaid amount of Rs. 1,00,000/- (Rs. One lakh only), we, Sh. _____ (name of surety) s/o Sh. _____, resident of _____ and Sh. _____ (name of surety) S/o Sh. _____, resident of _____ hereby undertake to pay, severally or jointly, a sum of Rs. 1,00,000/- (Rs. One lakh only) to the Bank. Such payment shall be made to Bank immediately on demand and without any delay or protest as we are having full knowledge of the fact that resignation of Sh./Ms/Mrs. _____ (name of Officer Scale-I) shall not be accepted till such payment is deposited with the Bank

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

The Chairman,
 Malwa Gramin Bank
 Head Office, Prem Basti Road,
 Sangrur

Dear Sir,

UNDERTAKING REGARDING DATE OF BIRTH

I, _____

S/o, W/o, D/o Sh. _____

declare/ undertake as under: -

1. My date of Birth is _____
2. My age as on **14.08.2017** is _____ years _____ months _____ days
3. I am seeking/ not seeking age relation because I belong to _____
 Category (write SC/ ST/ OBC/ General).

Yours faithfully,

(Signature)

Place : _____

Date : _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

The Chairman,
Malwa Gramin Bank
Head Office, Prem Basti Road,
Sangrur

Dear Sir,

UNDERTAKING REGARDING RELIGION

I, _____

S/o, W/o, D/o Sh. _____

declare/ undertake as under: -

1. I belong to _____ Category (Write SC/ OBC/ General)
2. My religion is _____
(In case of SC/ ST category, write HINDU OR SIKH Only)
3. I will inform the BANK, immediately, in case of any change in my religion at a later stage.

Yours faithfully,

(Signature)

Place : _____

Date : _____

MALWA GRAMIN BANK
HEAD OFFICE, SANGRUR

PROFILE OF THE EMPLOYEE/ OFFICER OF MALWA GRAMIN BANK

1. Name of the Employee / Officer: (In block letters in full)
.....
2. Designation : Officer Scale-I
3. Father's Name.....
4. Mother's Name.....
5. Date of Birth:
6. Permanent Home Address along with Phone numbers
.....
.....
7. Address for correspondence along with Phone numbers.....
.....
.....
8. Mobile Number.....
9. E-mail address
10. Educational Qualifications.....
11. Whether SC /ST/OBC.....
12. Date of Joining the Bank.....as.....

Signature of the Employee/ Officer

PF a/c No.....

The Chairman,
Malwa Gramin Bank,
Head Office, Sangrur

Dear Sir,

Joining Report

In compliance to your letter No. MGB/ 13/ Staff/ _____ dated: _____, I hereby submit my joining report today forenoon/afternoon. Please allow me to join my duties as Officer Scale-I.

Yours faithfully,

Signature_____

Name in full_____

Designation: Officer Scale-I

Date_____

Place_____