

PRAGATHI GRAMIN BANK

A Scheduled Bank owned by Government

Head Office : Post Box 55, Gandhinagar, **Bellary - 583 103** Phone : (08392) 255853 Fax: 256886 e-mail: pgbankhoss@gmail.com **PERSONNEL WING : STAFF SECTION**

DATE: 17.01.2012

We are pleased to announce the select list of candidates for the post of Officer Middle Management Scale-II, Scale-II (IT) and Scale-III – Interviews held from 12.01.2012 14.01.2012.

OFFICER MIDDLE MANAGEMENT SCALE-II

Sl No	Roll No	Name
1.	1102010100	PRAVEEN S
2.	1102050312	ABDULAHMAD J SURANAGI
3.	1102050324	RAMACHANDRA KRISHNA NAYARI
4.	1102070355	SHIVAKUMAR LAXASHETTI
5.	1102070400	RAVI C MATAPATHI
6.	1107050903	MEGHA A S
7.	1302070154	PRASANNA R BELAWADI
8.	1302070179	ARJUN C

OFFICER MIDDLE MANAGEMENT SCALE-II (IT)

Sl No	Roll No	Name
1.	1103030622	ASHOK K R
2.	1103050674	KASHINATH BEDARE
3.	1103050704	BADESAB NADAF
4.	1103070822	SRIKAR CANCHI
5.	1303010200	MANJUNATH G
6.	1303010208	SATISH R
7.	1303050244	MOINUDDIN ZAKI
8.	1303050251	RAKESH O P
9.	1303070328	VIKRAM PAI M
10.	1303070374	VASANTHA KUMAR M S
11.	1303070385	ANIL KUMAR V

OFFICER MIDDLE MANAGEMENT SCALE-III

Sl No	Roll No	Name
1	1101070051	PRASHANTH H M
2	1101070067	JAGANATHA J

CONGRATULATIONS.

Offer of Appointment Letters will be sent to aforesaid candidates shortly. Please note that this Offer of Appointment is subject to the terms and conditions of the Bank.

Candidates are requested to report at the following venue on **27.01.2012** for verification of the credentials etc., along with documents mentioned in the Offer of Appointment.

Venue: Pragathi Gramin Bank, Head Office, 32, Sanganakal Road, Gandhinagar, Bellary 583 103.
 Time : 10.00 AM

If they do not report as said above with all the credentials indicated, it will be construed that they are no longer interested in taking up the service in the Bank. Consequently, the Offer of Appointment will lapse automatically at the end of the said date and the Bank will not entertain any claim or will not engage in any type of correspondence.

The candidates who will report for verification of their credentials, will be issued postings on the said date and they will be required to report for duty at the place of their posting on 01.02.2012 without fail.

CHAIRMAN

MEDICAL FITNESS CERTIFICATE (To be obtained from a Government Civil Hospital)

1	Name and address of the candidate	
2	Height	
3	Weight	
4	Age	
	By appearance	
5	Sex	MALE/FEMALE
6	Is his/her vision normal If not, does he/she wear spectacles? If so, the extent of acuity of vision	
7	Does he/she suffer/has suffered from any of the followinga Any chronic and contagious disease?	
	b Colour blindnessc Muteness and/or deafness (In case of deafness, the degree)	
8	a Has he/she got any apparent physical defects?	
	b If so the nature and extent (%) in	
	i. Upper Limbs	
	ii. Lower Limbs	
	iii. Any other part of body (with details)	
9	Clinical assessment of Heart, Blood Pressure, Lungs, Abdomen	

10	Will any of the defects (if any on shown
10	Will any of the defects (if any as shown
	in clause 6 and/or clause 7 above),
	come in the way of his normal
	functioning like
	a Writing
	b Reading
	c Conversing
	d Cycling
	e Walking
	f Hearing
11	Chest Measurements
	a On full inspiration
	b On full expiration
	c Difference
12	Identification Marks
	1.
	2.
13	a Blood Sugar
	b Blood Group

- i. Certified that he/she is physically and mentally found fit to be employed in the Bank as _____(mention post).
- ii. Certified that he/she is found unfit to be employed in the Bank due to his/her following defects

a b c

c

Place :

Signature of the Doctor With Name, Registration Number and Seal

Date :

INFORMATION TO BE FURNISHED BY THE CANDIDATE

1	Name in full (in BLOCK LETTERS)	:	
2	Postal Address	:	
3	Father's/Husband's Name	•	
4	Had you or any of your close relatives suffered from Gout Epilepsy, Convulsions, Scrofula or insanity?		
5	Have you at any time suffered from or had symptoms of:		
	a Palpitation, fainting or any affection of Heart.		
	b Any affection of the Kidneys or Urinary Organs		
	c Any affection of Stomach, Liver etc.		
	d Had you met with any accident? If yes, details		
	e Have you ever undergone any surgical operations? If yes, details.		
6	Had you or any of your close relatives suffered from Blood Pressure or Diabetes? If yes, details thereof		
7	Have you ever been admitted in a Hospital, Sanatorium etc.? If yes, reasons		
8	Have you suffered from any other disease or illness of serious nature not mentioned above?		

I hereby declare that all the above statements are true to the best of my knowledge and belief. I have not withheld any material information. In case any of the information furnished above turns out to be false, appropriate action may be taken against me.

WITNES	S:	
Signature	:	
Name	:	
Address	: _	
	-	

SIGNATURE OF THE CANDIDATE DATE:

PRAGATHI GRAMIN BANK HEAD OFFICE : BELLARY

ATTESTATION FORM

From:

The furnishing of false information/suppression of any factual/or information in the attestation from 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 at any time during the service of a person, his services would be liable to be terminated.

DECLARATION

I certify that the information furnished 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. I have/will have no objection to the Bank making enquiries at any time (immediately/in the near future) regarding the statements made by me in the application, in any manner they decide to do so inclusive of police enquiry into my antecedents.

Address of the nearest Police Station:

Place :

Date :

Signature of the candidate.

ATTESTATION FORM

1	Name in full (in block capitals) with aliases, if any (please indicate if you have added or dropped at any state 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/City and name of the District head quarters.					
	and Dist Lane/Street	ress in full ie, Villag trict or House /Road and Town/ be District head quarters	number City and			
3	If originall address in	y a resident of Pak that country and the to Union of India	kistan the e date of			
4	Particulars than one y (including	of places (with perio year at a time during Pakistan) particulars of ter attaining the age of	the prece of all place	eding five yea es where you	rs. In case of have resided fo	stay abroad
From		То	full Vill and Distr number	age, Thana ict or House eet/Road and	1	the place in the
5	 (a) Father's (a) Name in full with aliases, if any (b) Present and Postal address (if dead, give last address) 					
	(c) Permanent Home address					
	(d) Profession (e) If in s official a	ervice, give designa				

6	Nationality of							
	(a) Father							
	(b) Mother							
	(c) Husband/wife							
	(d) Candidate							
	Place of Birth of H	Iusband	/Wife					
7	(a) Date of Birth							
	(b) Present age							
	(c) Age of Matric	ulation						
8	(a) Place of Birth							
	District and st	ate in w	hich situ	iated				
	(b) District and sta	ate to w	hich you	ı belong				
9	(a) Your religion			<u> </u>				
	(b) Are you a 1	nember	of a	scheduled				
	Caste/ Schedu	les Tribe	e/OBC					
10	Educational quali	fications	s showi	ng places of	f ea	ducation with	year	s in schools and
	Colleges since 15 th	^h year of	age.					
Nam	e of School/ Colleg	ge with	Date of	of entering	D	ate of leaving	Ex	kamination passed
full a	ddress							
11	Names of family n	nembers						
Nam		Relatio		Occupation		Annual Incom	ne	Whether
		to						dependent on
		candida	candidate					candidate
	I.							
12(a)	If you have, at an	ny time, 1	been en	ployed, give	det	tails.		
	gnation of post	Period	l			Full address of	of	Full reasons for
	of description of	Fr	om	То		the Officer/		leaving the
work		11	0111	10		Firm or		previous service
						Institution		

12(b)	If the previous employment was under	
	Government of India/an institution in the	
	public sector (including the State Bank of	
	India and its subsidiaries): If you had left	
	the service on giving the requisite notice	
	under Rule 5 of the Central Civil Services	
	(Temporary service) Rules 1949 or any	
	similar corresponding rules, were any	
	disciplinary proceedings framed against	
	you or had you been called upon to	
	explain your conduct in any matter at the	
	time you gave notice to termination of	
	service or at a subsequent date before	
	your services were actually terminated.	
13	Have never been prosecuted, kept under	
10	detention, or bound down/fined convicted	
	by a court of law for any offence or	
	debarred or disqualified by any Public	
	service Commission/ from appearing as	
	its examinations/selection?	
	If 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, find, conviction,	
	sentence etc., should be given.	
14	Name and full address of two responsible	
14	persons of your locality or two reference	
	to whom you are known.	
	to whom you are known.	
L	1	

I certify that the foregoing information is correct a complete to the best of my knowledge and belief. I am not of any circumstances which might impair my fitness for employment under Government.

Place : Date :

Signature of the candidate

IDENTITY CERTIFICATE

Certified that I have k	xnown Sri/Smt/Kum		
S/o/Daughter of Sri _		for the	last
years	_ months and that to the best of my knowledg	ge and be	elief
the particulars furnishe	d by him/her are correct.		

Signature

Place :	Designation of status and address:

(Certificate to be signed by any of the following)

- i Gazetted Offices of Central or State Government.
- ii Members of Parliament or State Legislative.
- iii Sub-Divisional; Magistrate/Officers.
- iv Tahasildars or Naib/Deputy Tahasildars authorised to exercise magisterial powers.
- v Principals and Head Masters of all recognised Institutions.
- vi Block Development officers.
- vii Post-Masters.

Date :

viii Panahcyath Inspectors.

PRAGATHI GRAMIN BANK HEAD OFFICE : BELLARY

PARTICULARS OF THE RELATIVES IN THE BANK

1.	Name of the Employee	:
2.	Designation	:
3.	Date of Birth	:
4.	Date of entry of into service	:
5.	Qualification	:

6. Particulars of relatives in the Bank :

Name	Branch	Nature of relationship	

I hereby declare that the information given above is true

Date :

Signature

LIST OF CLOSE RELATIVES FOR THE ABOVE PURPOSE IS

1.	Father	16. Hu	usband's mother	31.	Sisters' daughter
2.	Mother (including step mother)	17. Sis	ster's Husband	32.	Father's Brothers son
3.	Son (including step son)	18. Hu	usband's sister	33.	Father's Brothers daughter
4.	Son's wife	19. Hu	usband's father	34.	Father's sister's son
5.	Daughter (including step daughter)	20. Hu	usband's brother	35.	Father's brothers son
6.	Father's father	21. W	'ife's father	36.	Mother's Brother's daughter
7.	Mother's Mother	22. W	'ife's mother	37.	Mother's Sister's son
8.	Mother's father	23. W	'ife's brother	38.	Mother's Sister's daughter
9.	Mother's mother	24. W	'ife's sister	39.	Father's brother's wife
10.	Grandson	25. Fa	ather's brother	40.	Father's sister's daughter
11.	Grand daughter	26. Fa	ther's sister	41.	Mother's brother's wife
12.	Daughter's husband	27. Mo	other's sister	42.	Mother's sister's Husband
13.	Brother (including step brother)	28. Mo	other's brother	43.	Wife
14.	Brother's wife	29. Br	rother's daughter	44.	Husband
15.	Sister (including step sister)	30. Sis	ster's son	45.	Father's Sister's daughter

PROFORMA OF REPORT TO BE OBTAINED FROM PREVIOUS EMPLOYER(S)

1. Name of the candidate	
2. Period of which he/she was employed in your company/firm/department.	
3. Conduct during the period of service	
4. Whether the candidate is still in service or reasons for dismissal/discharge/resignation.	
5. Date of discharge/relief from the previous employer/s	
6. Whether there is anything in his/her past may render him unsuitable for service in the Bank.	
7. Is the candidate related to you	

Date :

Signature and Name

Designation :

Name of the company/Firm/Department

Address:

DECLARATION OF QUALIFICATION, AGE AND CASTE ETC.

The Chairman, Pragathi Gramin Bank, Head Office, 32, Sanganakal Road, Gandhinagar, BELLARY 583 103.

Dear Sir,

1. I am given to understand that I am being considered for appointment as a ______ in the Bank.

2.	Ι	hereby	declare	and	confirm	that	my	educational	qualification	are
							_			I
passo		ssed						standard	examination	from
								(Na	me of the Sc	hool)
	in	the year _					_·			

- 4. I also further declare that I belong to _______ community which is enumerated as ______.
- 5. I am making the above declarations sincerely and conscientiously believing the same to be true and with full knowledge that is on the faith of these declarations as in the Bank. I agree and confirm that if, at a future date, it is found by the Bank that I have concealed facts or made false declarations, the same would tantamount to fraud on my part to deceive the Bank and I would be liable for any punishments, including dismissal, which the Bank is entitled to award for major misconduct.

Yours faithfully,

(Signature) Full Name (in Capital letters) :

:

Full Address

CONDUCT AND CHARACTER CERTIFICATE

This is to certify t	that Sri					_
S/o /D/o / W/o				R/o	is	5
staying at		since	years	months.		

The conduct and character of the above candidate is satisfactory to the best of my knowledge.

Place :

Date :

Signature with seal

------cut here -----

CONDUCT AND CHARACTER CERTIFICATE

The conduct and character of the above candidate is satisfactory to the best of my knowledge.

Place : Date :

Signature with seal

-----cut here -----

CONDUCT AND CHARACTER CERTIFICATE

This is to certify t	hat Sri					_
S/o /D/o / W/o				R/o	i	S
staying at		since	years	months.		

The conduct and character of the above candidate is satisfactory to the best of my knowledge.

Place : Date :

Signature with seal