

GUIDELINES/DOCUMENTS FOR PROCESSING EMPLOYMENT ASSISTANCE CASES

(Documents should be forwarded in quadruplicate – 1 original & 3 copies.

All 4 sets should be arranged as per the guidelines and each page should be countersigned by the forwarding authority (ie Zila Sainik Board / Last Unit of the Ex-sailor))

- A) **Proforma A & B** – Each page of the Proforma part ‘A’ & ‘B’ should be duly filled-up by the applicant and each page of the Proforma Part ‘A’ & ‘B’ should be attested/countersigned by the forwarding authority (ie Zila Sainik Board /Last Unit).
- B) **Death Certificate / Medical Invalidation Report** – Death Certificate /Medical Invalidation Report of the government servant need to be submitted duly countersigned by the forwarding officer.
- C) **CE list** - CE list notifying the death casualty /Medically Boarded Out from service of the government servant needs to be submitted.
- D) **Application from Last Unit.** – A representation from the last unit recommending employment to the applicant in the Navy under the employment assistance scheme needs to be submitted.
- E) **Application from the w/o the deceased/ medically invalidated employee** – A Representation from w/o the deceased / medically invalidated employee for seeking employment for herself/applicant in the Indian Navy on compassionate grounds under the employment assistance scheme needs to be submitted duly countersigned by the forwarding officer.
- F) **Application from the Applicant** – A Representation from the applicant for seeking employment for himself /herself in the Indian Navy on compassionate grounds under the employment assistance scheme. Recent photo needs to be affixed, duly attested by the forwarding officer.
- G) **NOC** - No objection certificates from all the major dependents family members in favor of the applicant.
- H) **Moveable/Immovable property certificate** - Revenue Officers / Tahsildar’s Certificate regarding Moveable / Immoveable property indicating present market value and income if drawn from the property. The certificate should be on letter head of Tahsildar / Revenue Officer, and is a mandatory document. The documents which are in regional language should be translated either in English or Hindi.
- I) **Income Certificate** – Income Certificate from Civil Authority (ie Tahsildar /BDO of concerned District) needs to be submitted. Income Certificate should mention correct annual income of the family i.e. Income from pension and other sources separately. The documents which are in regional language should be translated either in English or Hindi.
- J) **Police Verification Certificate** – Police Verification Report /certificate issued by the competent authority, indicating the character of the applicant, and depicting correct economic & social background of the family be submitted. The documents which are in regional language should be translated either in English or Hindi.
- K) **Undertaking** – An undertaking from the applicant that he/she will look after and support the family after getting the job / employment needs to be submitted duly countersigned by the forwarding officer.
- L) **Self Declaration Affidavit on Rs.100/- stamp paper** – An affidavit should be prepared by the applicant mentioning all the facts of the family, giving full details of the family i.e. details of family members, name, age, marital status, current occupation, school going children, unmarried daughters /sisters, current address of the family, Assets and Liabilities of the family.

M) **Educational Certificates** - Attested copies of School Leaving Certificate / Mark sheet and other certificates in respect of the applicant in support of date of birth/age and educational and technical qualification.

N) **Willingness Certificate** –Willingness certificate from the applicant stating to accept any post offered under the employment assistance scheme needs to be submitted duly countersigned by the forwarding officer.

P) **Affidavit indicating change of name through marriage** - An affidavit is required to be submitted by the widow of the ex-sailor if she is applying for Employment assistance scheme, the affidavit is required to indicate her change in name, if any, by virtue of her marriage.

Q) **Pension Payment Order & Terminal Benefits** – Duly attested copies of Pension Payment Order (post 7th Pay Commission) and bank Passbook /Statement reflecting payment of Leave Encashment, GPF and current /previous month's statement reflecting payment of pension needs to be submitted.

R) **Caste Certificate** – If the applicant belongs to SC/ST/OBC caste, duly attested copy of caste certificate needs to be submitted.

S) **Photo Copy of Ration card and Aadhar Card** Duly attested copies be submitted.

T) **Family Particular** – Family particular details with relationship, Date of Birth, Marital Status be given on plain paper.

U) **Birth Certificates** - Copy of birth certificates of all minor children, if any.

Note:

- All 4 sets including Forms and documents submitted should be countersigned by the forwarding officer.
- Contact details i.e. phone number, email-id, present and permanent address should also be provided.
- All 4 sets should be arranged as per the guidelines/ checklist.

**PROFORMA REGARDING EMPLOYMENT OF DEPENDENTS OF GOVERNMENT SERVANTS
DYING WHILE IN SERVICE OR INVALID OUT ON MEDICAL GROUNDS OR MISSING**

PART – A

- I (a) Name of the Government Servant :
(Deceased/ retired on medical grounds or Missing)
- (b) Designation of the Government servant :
- (c) Date of birth of Government Servant :
- (d) Date of death / invalid out on medical grounds :
/or missing from service
- (e) Total length of service rendered by the :
Government Servant
- (f) Whether the Government Servant was :
Permanent or Temporary?
- (g) Whether the Government Servant belonged :
to SC/ST/OBC ?
- II (a) Name of the candidate for appointment :
- (b) His/Her relationship with the Government :
Servant
- (c) Date of birth of the candidate :
- (d) Educational qualification of the candidate :
- (e) Marital Status of the candidate :
- (f) Whether the candidate is physically :
Challenged?
- (g) Whether any other dependent family member :
of the deceased has been appointed on
compassionate grounds
- (h) Contact details of the candidate (Email /Mob) :
- III Particulars of Total Assets left including amount of:-
- (a) Family pension (post 7th Pay Commission) :
- (b) D.C.R. Gratuity :

- (c) G.P.F. Balance :
- (d) Life Insurance Policies :
(Including Postal life insurance)
- (e) C.G.E Insurance Amount / NGIF :
- (f) Encashment of Leave :
- (g) Income from other sources, if any /other Assets :
- (h) Total Value of Assets [add (b) to (g)] :

- IV (a) Moveable and Immoveable properties/ Land :
in the name of the deceased Government Servant
or any, dependent member of the family
- (b) If yes, annual income earned and details thereof :

- V Brief particulars of liabilities, if any :

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 should be indicated).

Ser No	Name (s)	Relationship with the Government Servant	Date of Birth & Age	Address	Employed or not (if employed, particulars of employment and emoluments)	Marital Status
(1)	(2)	(3)	(4)	(5)	(6)	(7)

DECLARATION/UNDERTAKING

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

2. I hereby also declare that, I shall continue to provide financial support to all the other family members who were dependent on the Government Servant/ member of the Armed Forces mentioned against 1(a) of Part-A of this Form and in case it is proved at any time that the said family members are being neglected or not being properly maintained by me in financial terms, my appointment may be terminated.

Signature of the candidate

Place:

Date:

Name:

Address:

.....

.....

Shri/Smt/Kum is known to me and the facts mentioned above by him/her are correct.

Signature of Pmt Government Servant

(Govt. Servant of a Gazetted Rank)

Place:

Date:

Name:

Designation:

Address:

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

Signature of the Welfare Officer

Place:

Date:

Name:

Designation:

Address:

PART – B

(To be filled in by the office in which employment is proposed)
(To be filled by Individual (Para I (a) to (d) and Para III))

- I. (a) Name of the Candidate for appointment :
- (b) His/ Her relationship with the Govt. Servant :
- (c) Age (date of birth), Educational Qualification and experience, if any :
- (d) Particulars for which Employment is proposed :
- (e) Whether there is vacancy of that post within the ceiling prescribed under the scheme of Compassionate appointment :
- (f) Whether relevant Recruitment Rules provide for direct recruitment? :
- (g) Whether the candidate fulfils the requirement of the recruitment Rules for the Post ? :
- (h) Apart from waiver of Employment Exchange / procedure what other relaxation 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 Govt. Servant died / retired on Medical grounds more than 05 years back, reason for delay in submission of case :
- IV. Personal recommendation of the Head of the Department in the Ministry/ Department/ Office :

Date:

Place:

Signature of the Officer forwarding the case

COUNTERSIGNED

INFORMATION SHEET

1. Name of the Candidate for Appointment :
2. Relationship with the Govt. Servant :
3. Name :
Rank :
Personnel No / Service No. :
4. Unit :
5. Date of Death :
6. Present Family Pension received :
(Post 7th Pay Commission)
7. Terminal benefits :
 - (a) DCRG : Rs.
 - (b) CGE Insurance Amount : Rs.
 - (c) ENCASHMENT OF LEAVE : Rs.
 - (d) GP Fund : Rs.
 - (e) LIC Policies : Rs.

TOTAL : Rs.
8. Monthly income other than pension : Rs.
9. Moveable /Immoveable property :
10. No. of dependents of deceased :
11. No. of unmarried daughters of deceased :
12. No. of minor children of deceased :
13. Left over service of the deceased :

It is certified that above mentioned facts have been verified from records and are correct.

Date:

Place:

(Signature & stamp of officer forwarding the case)

DELAY REPORT IN CHRONOLOGICAL ORDER FOR EMPLOYMENT ASSISTANCE

(In case delay is more than 01 year from the date of casualty)

1. Name of the candidate for appointment :
2. Name of the deceased government Servant :
3. Rank: Service No./Personnel No.: Unit Name:

<u>SL. No.</u>	<u>Date</u>	<u>Event of Action</u>
		Casualty (Death) _____
		Received an application from the applicant seeking Employment assistance in favor of herself/son/daughter
		Letter to MRO/Tahsildar has been sent to intimate the social status/ legal heir-ship and other related family particulars and financial position of the deceased employee
		Requisite information has been received from MRO
		The relevant documents received from deceased employees family members with a request for provision of employment under Employment Assistance Scheme to wife/son/daughter
		Case submitted to _____

4. Reasons for delay :

Place:
Date:

(Signature & stamp of the Officer Forwarding the case)

**APPLICATION FORM FROM THE WIFE OF THE DECEASED EMPLOYEE FOR SEEKING
EMPLOYMENT FOR HERSELF/APPLICANT IN THE NAVY UNDER THE EMPLOYMENT
ASSISTANCE SCHEME**

(To be filled /submitted by the wife of the deceased Govt. employee)

To

The _____

(Through Proper Channel)

REQUEST FOR EMPLOYMENT ASSISTANCE TO

**SHRI/SMT/KUM (NAME) (WIFE /SON/DAUGHTER/BROTHER/
SISTER) OF LATE (DESIGNATION) (P NO.) (UNIT)**

I, W/o Late
Rank P. No..... Unit submit that my
husband died on, leaving us behind. The details of dependent family members are as
under.

(a) Particulars of Children (Sons and daughters) with Age, Marital and Social status

<u>Sl. No.</u>	<u>Name</u>	<u>Relationship</u>	<u>Age</u>	<u>Marital Status</u>	<u>Employed/ Unemployed</u>
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(b) We reside in our own / rented house (strike out which is not applicable)

2. Particulars of Moveable / Immoveable Properties: -

(a) Moveable :

(b) Immoveable :

(c) Market value (Approx) :

(d) Monthly income, other than pension :

3. I request your goodself to consider me/Shri/ Kum. to
provide any Group 'C'/Group 'D' employment under Employment Assistance Scheme.

Thanking you,

Yours faithfully,

Place:
Date:

Signature:
Name:

APPLICATION FORM FROM THE APPLICANT FOR SEEKING EMPLOYMENT FOR HIMSELF/HERSELF IN THE NAVY UNDER THE EMPLOYMENT ASSISTANCE SCHEME

(To be filled-up by the applicant)

Duly attested by
the gazetted
officer

(Through Proper Channel)

REQUEST FOR EMPLOYMENT UNDER EMPLOYMENT ASSISTANCE SCHEME
TO W/o, S/o, D/o, B/o LATE

Sir,

I, _____ W/o, S/o, D/o, B/o _____ do hereby submit a request to considering me for an employment under Employment Assistance Scheme to overcome financial distress to my family due to the sudden demise of earning member of the family.

2. The details of my educational qualifications are as follows:-

S.No.	Level of Examination	Marks/ Percentage	Remarks
i	8 th Standard		
ii	9 th Standard		
iii	10 th Standard		
iv	Intermediate		
v	Graduation		
vi	Technical / Trade		

3. I undertake to look after the family members of the deceased Govt. servant and a declaration is enclosed to this effect.

4. My Date of Birth as per records is

5. My current residential address.....
.....

Thanking you,

Yours faithfully,

Place:

Date:

Signature:

Name:

NO OBJECTION CERTIFICATE

(To be signed by the all dependent family members of the deceased Govt. employee)

We, the undersigned hereby declare that we have “NO OBJECTION” for extending of provision of employment to Shri/Smt./Kum. in the Indian Navy on compassionate grounds under the Employment Assistance Scheme.

Ser No	Name (s)	Relationship with the Government Servant	Date of Birth & Age	Signature
(1)	(2)	(3)	(4)	(5)

Place:

Date:

COUNTERSIGNED

Signature & Stamp

- 8. Particulars of the employment :
- 9. Emolument from employment :
- 10. Monthly income of the family :
- 11. Source of Income :
- 12. Remarks / Recommendation of the Superintendent of Police :

Place:
Date:

Signature of Sr. Inspector of Police

Seal / Stamp of the office

UNDERTAKING / DECLARATION

I Shri/Smt/Kum hereby declare that I shall maintain financial support and look after other family member/s properly, who were dependent on Shri, the deceased / invalid out on medical grounds / missing employee against whom I have been provided employment on compassionate grounds. In case, if it is proved at any time that the said family members are being financially neglected or not being properly maintained by me, I fully understand that my appointment is liable to be terminated forthwith and I give my consent for it. Particulars of all dependent family members are as below:-

Ser No	Name (s)	Relations hip with the Governm ent Servant	Date of Birth & Age	Address	Employed or not (if employed, particulars of employment and emoluments	Marital Status
(1)	(2)	(3)	(4)	(5)	(6)	(7)

Signature of the candidate

Place:

Date:

Name:

Address:

.....

.....

COUNTERSIGNED

Signature & Stamp

WILLINGNESS CERTIFICATE

I Shri/Smt/Kum..... wife/ son / daughter / brother / sister of Shri the deceased / invalid out on medical grounds / missing employee, hereby declare that I am willing to take any post /employment (Group C /D) offered to me on compassionate grounds under the Employment Assistance Scheme.

Place:
Date:

Signature of the candidate

Name:
Address:
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COUNTERSIGNED

Signature & Stamp