



GOVERNMENT OF INDIA, MINISTRY OF DEFENCE
HEADQUARTERS ANDAMAN AND NICOBAR COMMAND
RECRUITMENT TO THE POST OF
TRADESMAN MATE



CERTIFICATE VERIFICATION AND MEDICAL EXAMINATION

1. Refer to the Notification published in the Employment News dated **6 – 12 August 2022**.
2. Details of the candidates, who appeared in the written examination held on **27 Aug 23** at Port Blair, those have been placed in the 'Provisionally Select List' and 'Wait List' for consideration for appointment to the post of Tradesman Mate (Group 'C', Pay Band as per VII CPC, Level 1 - Rs.18000/- to 56900/-, Non-Gazetted, Industrial) have been published on the website www.andaman.gov.in on **27 Oct 2023**. A separate letter is also being sent by email and post, for information of the candidates.
3. Candidates are required to download the following documents, placed at Appendix 'A' to 'C' to this Notification from website www.andaman.gov.in and make two sets of the same and submit these documents, duly filled (without any corrections/ overwriting), affixing latest colour passport size photograph (not older than 03 months), wherever necessary, by speed post latest by **15 Jan 2024**: -
 - (a) Medical Examination Form (Appendix 'A')
 - (b) Character Certificate (Appendix 'B')
 - (c) Attestation Form (Appendix 'C')
4. The envelop must be superscribed on top as "**VERIFIED DOCUMENTS FOR RECRUITMENT TO THE POST OF TRADESMAN MATE (112)**" for _____ (Roll No of the candidate) in **CATEGORY** "**_____**". The offer of Appointment will be issued to candidates who will submit, duly completed, above mentioned forms on time with this Headquarters at following address: -

The Commodore Superintendent
(for OiC, Civilian Recruitment Cell)
Naval Ship Repair Yard,
Post Box No. 705,
Haddo, Port Blair – 744 102
5. Candidates issued with the Appointment Letter are to bring along with them the following **Original** documents towards certificate verification: -
 - (a) Educational Qualification Certificates.
 - (b) NAC issued by NCVT in the relevant Trade.
 - (c) Latest Caste Certificate and PwBD Certificate as applicable.
 - (d) Discharge Book for Ex-Serviceman.
 - (e) Acceptance certificate for Resignation/ Technical Resignation issued by the Competent Authority for Departmental Candidates.
 - (f) Photo Identity proof submitted at the time of Written Examination.
 - (g) Xerox copy of the originally filled in application applied for the post in response to the notification.
 - (h) Permanent Account Number (PAN) card and Aadhar Card.
 - (j) Ten (10) latest passport size colour photographs.

Note: Candidates reporting without above all or any one of the relevant certificates/ documents as applicable will not be entertained and their candidature will be rejected.

6. It may be noted that you have been placed in the “**Provisionally Select List**” and “**Wait List**” based on your merit in the Written Examination. **No bribe in cash or kind is required to be paid to anyone who-so-ever for your appointment. Any, canvassing or paying bribes directly or indirectly in cash or kind by the candidates will disqualify his/ her candidature and termination of his/ her service, if proved post recruitment.**

Port Blair

Date: 01 Dec 2023

Sd/-xxx
Officer-in-Charge
Command Civilian Recruitment Cell
for Commander-in-Chief

Affix

latest

photo

MEDICAL EXAMINATION

(On Admission to Government Service in terms of
Article 49 of Civil Service Regulations)

I hereby certify that I have examined Shri/Smt/Ms _____
a candidate for employment as _____ in
Headquarters, Andaman and Nicobar Command, Port Blair and cannot discover that he/
she has any disease communicable or otherwise constitutional weakness or infirmity or
bodily infirmity except _____. I do not consider this is a
disqualification for employment as _____. His/her age according
to his/her own statement is _____ years and by appearance about _____ years.

Signature of Medical Officer
Office Seal

Date: _____

II

I hereby certify that to the best of my knowledge and belief my age is _____ years.

Marks of Identification:

1.

2.

Signature or Left Thumb impression
Of the individual

Surname & Name _____

in capital letters _____

Date: _____

Government service, the authority which directs him for medical examination should also attach with the form of the medical certificate a declaration form, as indicated below, which is to be filled in by the candidate concerned in the presence of the Medical Officer.

CANDIDATE'S STATEMENT AND DECLARATION

The candidate must make the statement required below prior to his medical examination and must sign the declaration appended thereto. His attention is specially directed to the warning contained in the Note below:-

1. State your name in full (in block letters) : _____
2. State your age and place of birth : _____
3. (a) Have you ever had smallpox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, and appendicitis? : _____

Or

- (b) Any other disease or accident requiring confinement to bed and medical or surgical treatment? : _____
4. When have you last vaccinated? : _____
5. Have you or any of your near relations been afflicted with consumption, scrofula, asthma, fits, epilepsy or insanity? : _____
6. Have you suffered from any form of nervousness due to overwork or any other cause : _____
7. Have you been examined and declared fit for Government service by a Medical Officer / Medical Board, within the last three years? : _____
8. Furnish the following particulars concerning your family :- : _____

Father's age if living and state of health	Father's age at death and cause of death	No. of brothers living, their ages and state of health	No. of brothers dead, their ages at death and cause of death
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Mother's age if living and state of health	Mother's age at death and cause of death	No. of sisters living, their ages and state of health	No. of sisters dead, their ages at death and cause of death
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I declare all the above answers to be, to the best of my belief, true and correct.

I also solemnly affirm that I have not received disability certificate/pension on account of any disease or other condition: -

Candidate's Signature _____

Signed in my presence _____

Signature if Medical Officer _____

NOTE: The candidate will be held responsible for accuracy of the above statement. By willfully suppressing any information he/ she will incur the risk of losing the appointment and, if approved, of forfeiting all claim to superannuation allowances or gratuity.

PHYSICAL EXAMINATION

1. General Development: Good_____ Fair_____ Poor_____
- Nutrition: Thin _____ Average _____ Obese_____
- Height (without shoes)_____ Weight _____
- Any recent change in weight ?
- Temperature _____
- Girth of Chest:-
- (a) (After full inspiration)
- (b) (After full expiration)

2. Skin: Any obvious disease
3. Eyes: (1) Any disease
(2) Night Blindness
(3) Defect in colour vision
(4) Field of vision
(5) Visual Acuity
(6) Colour Perception

Acuity of vision	Naked eye	With glasses	Strength glasses		
			Sp.	Cyl.	Axis
Distant R.E. Vision L.E.					
Near R.E. Vision L.E.					

Hypermetropia (Manifest)

R.E.

L.E.

-
4. Ears : Inspection_____ Hearing Right Ear _____
- Left Ear_____

5. Glands_____ Thyroid _____

6. Condition of teeth _____

7. Respiratory System: Does physical examination reveal anything abnormal in the respiratory organs: If yes, explain fully.

CIRCULATORY SYSTEM

8. (a) Heart: Any organic lesions?
Rate _____ Standing _____
After hopping 25 times _____
2 minute after hopping _____
(b) Blood pressure: Systolic _____
Diastolic _____
9. Abdomen Girth _____ Tenderness _____ Hernia _____
(a) Palpable : Liver _____ Spleen _____ - Kidneys _____ Tumors _____
(b) Hemorrhoids _____ Fistula _____
10. Nervous system: Indications of nervous or mental disability
11. Locomotor System: Any abnormality _____
-

12. Genito Urinary System Any evidence of hydrocele
Varicocele, etc. _____

- | | |
|-------------------------------|------------------|
| (a) Physical appearance _____ | (b) Sp. Gr _____ |
| (c) Albumin _____ | (d) Sugar _____ |
| (e) Casts _____ | (f) Cells _____ |
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13. 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 a candidate?

14. State whether the candidate is:
- (i) Fit _____
 - (ii) Unfit on account of _____
 - (iii) Temporarily unfit on account of _____

Name and Designation of the Medical Officer

Station:

Date

Note:- In the case of female candidate: If it is found that she is pregnant of 12 weeks standing or over, she should be declared temporarily unfit.

CHARACTER CERTIFICATE

1. Certified that I have known Sri/Smt/Ms. _____
Son/Daughter/Wife of Sri _____ for the last
_____ years _____ months and that to the best of my knowledge and belief,
he/she bears reputable character and has no antecedents which tender his unsuitable for
Government Employment.

2. Sri/Smt/Ms _____ is not related to me.

Please affix a recent
passport size photograph.
The signature of the
officer and stamp are to
be clear and half of the
signature and stamp is to
be covered on the
photograph and the
remaining half on the
paper

Date : Signature (1) :

Place : Designation

To be attested by the District Magistrate

“ATTESTED”

Office Seal

Date : Signature (2) :

Place : Designation :

Instructions: 1. Signature (1) is to be signed by Gazetted Officer attesting the Photograph.
2. Signature (2) is to be signed by the officer not below the rank of District
Magistrate or equivalent alongwith round seal.
3. Police verification be enclosed with this certificate.

Note: This certificate is sought for absorption / recruitment to the post of
Tradesman Mate at Headquarters, Andaman and Nicobar Command, Port Blair.

ATTESTATION FORM

Appendix 'C'

Affix signed Passport size (5 cms x 7 cms) Approx. Copy of recent photograph	WARNING	
	1	The furnishing of false information or suppression of any factual information in the Attestation Form would be disqualification, and is likely to render the candidate unfit for employment under the Government.
	2	If detained, arrested, prosecuted, bound down, fines convicted, debarred, acquitted etc., subsequent to the completion of submission of this form, the details should be communicated immediately to the authorities to whom the Attestation Form has been sent early, failing which it will be deemed to be suppression of factual information.
	3	If, the fact that false information has been furnished or that 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.

1	Name in Full (in BLOCK CAPITALS)	NAME	SURNAME

2	Present Address in full (i.e., Village, Thana and District, or House No., Lane/Street/Road & Town) :	
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3	Home Address in full (i.e., Village, Thana & District, or House No., Lane/Street/Road and Town and name of District Headquarters)	
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4	Aadhar Card No.	
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5	PAN No.	
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6	Nationality	
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7	(a)	Date of Birth (DD/MM/YYYY)	
	(b)	Present age	
	(c)	Age at Matriculation	

8	(a)	Place of Birth, District and State in which situated	
	(b)	District and State to which you belong	
	(c)	District and State which your father originally belong	

9	(a)	Your Religion	
	(b)	Are you a member of a Scheduled Caste/Scheduled Tribe? (Answer Yes/No)	

10	Particulars of places (with periods of residence) where you have resided for more than one year at a time during the proceeding five years. In case of stay abroad (including Pakistan) particulars of all places where you have resided 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 & District or House No. Lane/Street/Road & Town	Name of the District Headquarters or the place mentioned in the preceding column.

11		Name (in full & aliases if any)	Nationality (by birth & or by domicile)	Place of Birth	Occupation if employed give designation & official address	Present postal address (if dead give last address)	Permanent Home address
	(a)	Father					
	(b)	Mother					
	(c)	Spouse					

12	Information to be furnished with regard to son(s) and/or daughters in case they are studying/living in a foreign country:				
	Name	Nationality by birth & or by domicile	Place of Birth	Country in which studying/living with full address	Date from which studying/living in the country mentioned in the previous column

13	Educational Qualification showing places of education with years in Schools and Colleges since 15th year of age:			
	Name of School/College (with full address)	Date of Entering	Date of Leaving	Examination Passed

14	(a)	Are you holding or have any time held an appointment under Central or State Government or a Semi-Government or a Quasi Government body or an autonomous body or a Public Sector Undertaking or a Private Firm or Institution? If so, give full particulars with date of employment up-to-date				
		Period		Designation emoluments & nature of employment	Full name & address of employer	Reasons for leaving previous service
		From	To			
	(b)	If the previous employment was under the Government of India/a State Government/ an undertaking owned or controlled by the Government of India or a State Government / a Autonomous Body/University/Local Body.				

14	(b)	If you had left service on giving a month's notice under Rule 5 of the Central Civil Service (Temporary Service) Rules 1965, or any similar corresponding rules, where any disciplinary proceedings frame against you, or had you been called upon to explain your conduct in an matter at the time you gave notice of termination of service, or at a subsequent date(s), before your services are actually terminated?

15	(i)	(a) Have you ever been arrested?	Yes/No
		(b) Have you ever been prosecuted?	Yes/No
		(c) Have you ever been kept under detention?	Yes/No
		(d) Have you ever been fined by a Court of Law?	Yes/No
		(e) Have you ever been convicted by a court of Law for any Office?	Yes/No
		(f) Is any case pending against you in any Court of Law at the time of filling up this Attestation Form?	Yes/No
		(g) Whether discharged/expelled/withdrawn from any training/institution under the Government or otherwise?	Yes/No
	(ii)	If the answer to any of the above mentioned question is 'Yes' give full particulars of the case/arrest/detention/fine/conviction/sentence/punishment etc and/or the nature of the case pending in the Court/University/Educational Authority etc at the time of filling up this attestation form:	
Notes:	(i) Please also see the 'WARNING' at the top of this Attestation Form		
	(ii) Specific answers to each of the questions should be given by striking out 'Yes' or 'No' as the case may be.		

16	Name of two responsible persons of your locality or two references to whom you are known	1)	
		2)	

I certify that the foregoing information is correct and complete to the best of my knowledge and belief.
I am fully aware that by providing false information or suppressing material information while filling this form, the authorities have full right to terminate my appointment letter and I am also liable for appropriate criminal/civil action as a consequence.
I am not aware of any circumstances which might impair my fitness for employment under Government.
<div style="text-align: right; margin-right: 100px;"> Signature of the Candidate: Date: Place </div>

TO BE FILLED BY THE OFFICE

Name, Designation and full address of the appointment authority.

Post for which the candidate is being considered