Rank- …….. **CGL Exam-2024**

CANDIDATE'S STATEMENT AND DECLARATION

(The candidate must make the following statement and must sign the declaration below it before his/her medical examination. Attention is specially invited to the WARNING in the 'Note' at the bottom of page 2.)

1. Name in full:_____
(in BLOCK letters)

2. Age & place of birth:_____

3. Have you ever had

a) small-pox, intermittent fever or and other fever, enlargement or suppuration of glands, spitting of blood, fainting attacks, rheumatism or appendicitis? _____

OR

b) any other disease or accident requiring confinement to bed and medical or surgical treatment? _____

4. When were you last vaccinated? _____

5. Have you or any of your relatives been afflicted by consumption, scrofula, gout 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 Govt. service by a medical officer/ Medical Board within the last three years? _____

8. Furnish the following particulars:

Father's age, if living, & state of health	Father's age at the time of death of cause of death	No. of brothers living, their ages and state of health	No. of brothers who have died, their ages at death and cause of death

Contd…../

Mother's age, if living & state of health	Mother's age at the time of death and cause of death	No. of sisters living, their ages and state of health	No. of sisters who have died, their ages at death and cause of death

DECLARATION

I declare that all the above answers are true and correct to the best of my knowledge and belief. I also solemnly affirm that I have/ have not* received any disability certificate/ pension* on account of any disease or other condition.

(*strike out whichever is not applicable)

Candidate's Signature

Date:_____

Signed in my presence

Signature of Medical Officer

Name :

& Designation:

(with stamp)

Note: The candidate will be held responsible for the accuracy of the above statement. By willfully suppressing any information he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to superannuation allowance or gratuity.

(Please take print on the back of the same piece of paper on which page 1 is printed)