राजस्थान सरकार विधि एंव विधिक कार्य विभाग

क्रमांक प. 19(2)न्याय / 2015

जयपुर, दिनांक 21,03.17

-ः सूचनाः-

राजस्थान न्यायिक सेवा 2016 (प्रतीक्षा सूची में चयनित) अभ्यर्थियों को निर्देशित किया जाता है कि वे पूर्वाचरण के बारे में Attestation Form की तीन प्रतियों में पूर्ति कर अलग—अलग राजपत्रित अधिकारियों से सत्यापित करा कर स्वयं के तीन रंगीन छायाचित्र सहित इस विभाग को सात दिवस में भिजवाने का श्रम करें ताकि राजस्थान न्यायिक सेवा में नियुक्ति की आवश्यक कार्यवाही की जा सकें। इस संबंध में Attestation Form की PDF प्रति विभागीय पोर्टल Law.rajasthan.gov.in पर अपलोड कर दी गई है।

(डॉ. कैलाश चन्द अटवासिया) संयुक्त शासन सचिव

ATTESTATION FORM

								Photo	
	1.	(Pleas	se indicate	n block capitals) with aliases, if any, if you have added or dropped at any your name or surname).		Name			
2. Present address in full (i.e. Village, Thana & Distt. or House No., Lane/Street and Road)									
	3.			full (i.e. Village, Thana & Distt. ane/Street and Road)					
	4. P	4. Particulars of Places where you have resided for more than one year during the preceding five years.							
	Fro	m	То	Residential Address in full (i.e. Village	e, Thana	a & Distt. or House	No., Lane	/Street and Road)	
	5.	Eather	r'e (a) Name	e in full with aliases, if any,	(0)				
	J.			l address (if dead, give last address).	(a) (b)				
		(-)		(12 and 15 and 1					
		(c) Pe	rmanent Ho	ome Address	(c)				
		(d) Pr	ofession		(d)				
		(e) If	in Service g	give designation & official address	(e)				
	6.	(i) Na	tionality of	:					
		(8	a) Father		(a)				
			o) Mother	•	(b)				
			e) Husband		(c)				
			d) Wife ace of birth	of:	(d)				
) Husband		(a)				
) Wife		(b)				
	_								
	7.	(a) E:	xact date of	birth	(a)				
			resent age		(b)				
		(c) A	ge at matric	culation	(c)				
	8.		ace of birth	n, District & State in which it is situated te address	(a)				
		(b) D	istrict & St	ate to which you belong.	(b)				
	9.	(a) St	ate your Re	eligion.	(a)				
				ember of a Scheduled Caste/Scheduled	(b)				
				Answer 'Yes' or 'No' and if the answer is					
			'yes' state	the name thereof.					

10.	Education Qualifications showing places of education with years in School and Colleges since 15
	years of age.(with complete address)

	Name of School/Colleges with full.	Date of ent	tering	Date of le	eaving	Examination	
						Passed	*
				-			
11.	If you have, at any time been emplo		ils :-	D ' 1	F 11 11	C 41 OCC -	F:
	Designation of Post hold or description	of work		Period		ss of the Office, r where you residing	
					time.	i where you residing	on service
			From	То			
							
							
12.	Have you ever been convicted by a	Court or any	Officer	?			
	If the answer is 'Yes' the full particular	lars of convid	ctions &	ζ			
	the sentences should be given.						(*)
13.	Name of two managina areas	C11:4-			(1)		
13.	Name of two responsible persons of references to whom/you are known.		or two		(1)		
	references to whom you are known.				(2)		
					V = /		
	I certify that foregoing information i	s correct and	comple	te to the bes	st of my knowledg	ge and behalf.	
I an	n not aware of any circumstances which i	might impair	my fitne	ess for empl	oyment under Go	vernment.	
	3						
Plac	e		Si	gnature of c	andidate		
	(Certificate of be signed by a Gazetted	Officer or M	ambar c	of Lagislativ	e or other outhori	ty prescribed	
by t	he Appointing Authority.)	Officer of Mi	ember c	or Legislauv	e of other authori	ty preserioed	et.
	Certified that I have known Shri/Smt./k	Kumari			S/o/Wi	fe/Daughter	
of S	hri						
the	best of knowledge and belief the particul	ars furnished	by him	her are con	rect.		

Po f				Desi	gnation or Status	& Address	
	:e						
Dat	e						

Shri	for last	yearsnonthsand to b
the best of my knowledge	and belief the particulars fu	urnished by him/her are correct.
		Signature
		Designation
		Status and
		Address
Place		
Date		

(Certificates to be signed by a Gazetted Officer or member of state Legislature or other authority prescribed by the

Appointing Authority)