Joining Formalities (Check List)

1. Format for HRMS data
2. Format for Medi-claim
3. Candidate Declaration regarding document Submission.
4. Joining Formalities set:-
    - Specimen Signature of the Employee.
    - Reporting for the completion of pre joining formalities
    - Joining Report.
    - Letter of Acceptance of Appointment.
    - Experience Certificate.
    - Relieving/Discharge Certificate from Previous Employer.
    - Certificate of Conduct & Performance.
    - Agreement of Services.
    - Annexure – I, Indemnity Bond with Surety Etc.
    - Undertaking for employees/officers in SHGB for appointment in Higher Grade.
    - Schedule –I Declaration of Fidelity and Secrecy.
    - Schedule – II Declaration to be obtained from every Employee on First Appointment.
    - Schedule-III, Declaration of Domicile.
    - Name and Address of two respectable persons.
    - Acceptance of Information Security Policy.
    - Medical Report (With X Ray Sheet).
    - Personal Bio-Data.
    - Attestation-Form (4 Copies)
    - Identity Form.
    - Undertaking for Ex-Serviceman
    - Caste Certificate.
    - Form of certificate by OBC & Annexure - II OBC Declaration Performa.
    - Form for appointment of beneficiary under rule 6 of the gratuity fund.
    - Copies of Certificates- Educational Qualification.
    - Any other relevant certificate.
5. Asset & Liability
6. Character Certificate.
7. Police Verification Report.
8. CIBIL Report (At HO level)
9. CIBIL Undertaking
10. Seven colored photograph
11. Shgb email print out
12. IBPS email print out
13. Online application print out
14. Candidate document set sent by IBPS.

Data for HRMS (In capital Letters only)			
Name			
Father Name			
Mother Name			
Designation			
Category			
Gender			
Date of Birth			
Aadhar Card No.			
Pan Card No.			
Mother Tongue			
Religion			
Marital Status	Married/ Single		
Spouse Name if applicable		Date of Marriage	
Nominee & Relation		Nominee's Date of Birth	
Address Permanent			
Address Present			
Email Address			
Contact No.	**Self**	**Other Contact No. with Name & Relation**	

Qualification	Stream	Regular/Correspondence	Marks %	Name of College	University

Candidate Signature

Mediclaim Data

Sr. No.	EMP code	Designation	Cadre	Name of self & Family Members	Relation	Gender	DOJ of Employee	DOB	AGE	PHONE NO.	E - Mail id

Name:
Signature:
Date:

Format of the Candidate Declaration

To,

Haryana Gramin Bank

I, _____ (Full Name of candidate) hereby submit the photocopies and original documents for verification for the Pre-Joining Formalities under CRP RRBs _____for the post of _____ (Name of Post).

I am submitting the following documents:

(The candidate should write the list of documents submitted by him/her)

I understand that in case I am found ineligible for the above-mentioned post during the verification, my candidature will stand cancelled.

Full Name of candidate:

Roll No.:

Date of birth:

Signature:

Place :

Date :

Haryana Gramin Bank,

Head Office, Rohtak.

Specimen Signature of the Employee

Date: _____

Photo

Name of Employee: _____

Father's Name: _____

Designation: _____

Date of Joining the Bank: _____

Date of Birth: _____

Specimen Signature:

Signature (in English)	Signature (in Hindi)	Initials

Unique ID No.

Attested/ Verified By

The General Manager,
Haryana Gramin Bank
Head Office: Rohtak.

Respected Sir,

Reg: Reporting for the completion of Pre joining formalities for the post of _____.

In compliance to your office letter No. HO/HRD/__/… …….. dated …… I, hereby, report at HGB, Head Office, Rohtak today i.e. on …… for the post of _____.

Kindly allow me to complete the pre-joining formalities.

Thanking you,

Yours faithfully,

(Signature)

Date: ……

Name: ……

S/o.W/o.D/o……...

Address ……...

The General Manager,
Haryana Gramin Bank
Head Office: Rohtak.

Respected Sir,

Reg: Joining Report for the post of _____.

In compliance to your office letter No. HO/HRDD/____/_____ dated ……, after completing all the required formalities, I hereby submit my joining report for the post of _____ today i.e .

Kindly allow me to join the Bank.

Thanking you,

Yours faithfully,

(Signature)

Date:

Name:
S/W/D/o:
Post:
Roll No:
Address:

LETTER OF ACCEPTANCE OF APPOINTMENT
IN HARYANA GRAMIN BANK

The General Manager,
Haryana Gramin Bank,
Head Office, HGB House,
Plot No.-1, Sector-3
Rohtak – 124001 (Haryana).

Respected Sir,

Ref: Your Letter of Appointment bearing No. HO/HRD/____/ ….. dated …….

Reg: Offer of appointment in Haryana Gramin Bank on the post of _____.

I acknowledge your above letter of appointment as _____ in your Bank.

I, hereby, accept all the terms and conditions laid down in the appointment letter, which I have thoroughly read and understood. I also agree to abide by the Sarva Haryana Gramin Bank (Officers and Employees) Service Regulation, 2010 and amendments made therein for the staff from time to time.

I confirm that I shall report at Haryana Gramin Bank, _____ on…….. at ……... and shall produce all the original documents asked by you before I am permitted to join.

Thanking you,

Yours faithfully,

(Signature)

Date:----------

Name:_____
S/o, W/o, D/o_____
Address_____
_____
_____
_____

CERTIFICATE OF CONDUCT & PERFORMANCE

Ref.No : Date : _____

The Chairman,
Haryana Gramin Bank,
Plot No.-1,Sec-3,
Head Office, Rohtak-124001.

Dear Sir,

Reg: Shri/ Mrs/ Miss _____

This is to certify that Shri/Mrs./Miss _____ working as _____With us from _____ to _____ bears a good moral character. His/Her conduct has been good and his/her performance has been good/satisfactory/average/unsatisfactory during the period he/she remained with us.

Signature & Seal of the Competent
Authority to issue such Certificate

Postal Address:_____

_____

_____

Landline:_____

Mob No.:_____

Email Id:_____

N.B.: Candidate must bring this Certificate in a Sealed Cover from his/her present employer and submit the same to us at the time of joining along with other joining formalities.

AGREEMENT OF SERVICES
(To be stamped as per State Stamp Rules)

This Agreement made at _____ this _____ day of_____20__ between Haryana Gramin Bank, a body corporate constituted under the Regional Rural Banks Act, 1976 and having its Head Office at Rohtak (formerly known as Sarva Haryana Gramin Bank, notified vide Gazette Notification dated 29th November 2013 issued by the Government of India, Ministry of Finance, Department of Economic Affairs (Banking Division), New Delhi, and subsequently renamed as Haryana Gramin Bank vide Gazette Notification dated 23rd October 2025 issued by the Government of India in exercise of powers conferred under Section 3(1) of the said Act on the request of Punjab National Bank), hereinafter referred to as the 'Employer Bank' of the First Part;

and

Shri/Ms._____S/o/D/o/W/o _____

Resident of _____

particulars of whose identity and photograph are given in the identity form, attached hereto (hereinafter called the employee) of Second Part.

Whereas on the application of the employee and subsequent successful completion of prescribed recruitment process, the Employer Bank has agreed to take the employee Sh./Ms. _____ S/o/D/o/W/o Sh._____ into its service on the terms and conditions hereinafter mentioned and subject to the general Rules and Regulations of the Employer Bank.

Contd…..2

Now, this Agreement witnesseth as under:

1. **COMMENCEMENT:** This Agreement shall commence from the date hereof or the date on which the employee assumes charge of his/her duties whichever is earlier, and shall remain in force until he/she is duly terminated.

2. **REMUNERATION:** The employee will receive such salary and allowances as may be fixed for him/her from time to time by the Employer Bank generally or specifically.

3. **DUTIES:**

a) The employee will attend office regularly during the working hours as fixed by the Employer Bank and perform the duties entrusted to him/her faithfully and honestly. He/ She further agrees to work outside the working hours whenever called upon to do so by his/her superior officers.

b) The Employer bank shall have the right to allot any duties to the employee for which he/she may be considered fit and competent and shall have the right to transfer him/her to any branch of the Employer Bank or to send him/her to any other place, where the business of the Employer Bank may need his/her services.

c) The employee shall not either during the continuance of his/her employment hereunder, or thereafter, except in the course of his/her duties as such employee, divulge to any person whatsoever, and shall use his/her best endeavor to prevent the publication or disclosure of any information as to the practices, business dealings or affairs of any of its customers with the Employer Bank or any other matter

Contd..3

which may come to his/her knowledge by reason of his/her employment under this Agreement.

d) That the employee shall devote the whole of his/her time, attention and abilities, etc., to the business of the Employer Bank and shall obey all Orders issued from time to time or given to him/her by his/her superior officers in all respects, and conform to and comply with the directions given and guidelines/ Regulations of the Employer Bank and shall diligently and faithfully serve the Employer Bank and use his/her utmost endeavor to promote its interests.

e) That the employee shall be a whole-time servant of the Employer Bank and shall not; so long he/she holds any appointment in the Employer Bank, engage either directly or indirectly either in any employment, business, trade or speculation of any kind.

4. TERMINATION:

(1) (a) No employee shall leave or discontinue his service in the Employer Bank without first giving notice in writing to the Appointing Authority of his/her intention to leave or discontinue his/her service or resign;

(b) The period of Notice required shall be of three months, in case of confirmed employee and one month, in case of employee who is on probation.

(c) In case of breach of clause (1) (b) above, an employee shall be liable to pay to the Employer Bank as compensation, a sum equal to his/her pay for the period of notice required of him/her.

(2) Notwithstanding anything to the contrary contained in sub-clause (1) above, an employee against whom disciplinary proceedings is

Contd….4

Contemplated or pending, shall not leave, discontinue or resign from his/her service in the Employer Bank without the prior approval in writing of the Appointing Authority and any notice of resignation given by such employee before or during the disciplinary proceedings shall not take effect unless it is accepted by the Competent Authority.

Explanation:

Disciplinary proceedings shall be deemed to be contemplated or pending against an employee for the purpose of this clause, if he/she has been placed under suspension or any notice has been issued to him to Show Cause why disciplinary proceedings should not be instituted against him/her until final Orders are passed by the Competent Authority.

(3) a) The Employer Bank will be entitled to dispense with the employee's services, where during the period of probation, including the period of extension of probation, if any, the Appointing Authority is of the opinion that the employee is not fit for confirmation, after giving one month's notice or pay in lieu thereof.

b) If an employee remains absent from duties or be late in attendance without having obtained the permission of the Competent Authority and in case of sickness or accident without submitting a proper Medical Certificate from a Medical Practitioner acceptable to the Employer Bank or absents himself/herself from duty without leave or overstays his/her leave or is habitually unpunctual in attendance or is negligent in performance of his/her duties or is guilty of misconduct or dishonesty to the Employer Bank, shall be liable to such disciplinary measure as the Competent Authority may impose.

Further, if an employee commits breach of any of the terms and conditions of this Agreement, the Employer Bank shall have the right to terminate his/her service without notice and without paying him/her any salary in lieu thereof.

Contd….5

c) The decision of the Board of Directors or Chairman or any other Competent Authority appointed by the Employer Bank for his/her purpose, shall on any matter mentioned in sub-clause (b) above, be conclusive and binding on the employee and shall not be questioned by him/her.

5. **LEAVE, ETC.** The employee undertakes to be bound by all Rules and Regulations in force from time to time in all matters including promotion, transfer, travelling and other allowances, leave, security, Provident Fund, etc.

6. SECURITY:

a) The employee shall give such security as the Board of Directors or the Chairman or any other Competent Authority of the Employer Bank appointed in this behalf may determine from time to time, for due performance of this Agreement and for recoupment of any loss caused to the Employer Bank due to his/her negligence, misconduct, fraud or violation of any terms of this Agreement.

b) That the Employer Bank shall have a first lien on all dues of the employee including security as well as salary and the Employer Bank shall have the right to recover all losses suffered by it through fraud, negligence or misconduct of the employee from such dues.

c) The security given by the employee shall remain under the control of the Employer Bank during the entire period of service of the employee with the Employer Bank and till the settlement of all claims of the Employer Bank for loss of damage, if any, caused on account of breach of any of the terms and conditions of the agreement by the employee.

Contd….6

d) Subject to the rights of the Employer Bank reserved under clause (b) and (c) above, the security held shall become refundable to the employee on the expiry of 90 days after termination of his/her service.

e) If the Employer Bank suffers any loss on account of non-performance of any of the conditions of this Agreement or on account of any act or omission of the employee or by reason of negligence, fraud, misconduct or dishonesty in the discharge of his/her duties, the Employer Bank shall be entitled to recover the loss from the security of the employee and to recover the deficiency, if any, from his/her personal and other property.

7. **DURATION OF AGREEMENT:** This Agreement shall remain in force as long as the employee continues in the service of the Employer Bank notwithstanding any change in his/her designation, status, salary or the duties and responsibilities entrusted to him/her.

8. SUSPENSION:

The employee on his/her dismissal from service for misconduct shall not be entitled to any emolument for the period of his/her suspension except a subsistence allowance.

9. **DISABILITY OF EMPLOYEE:** After the termination of his/her employment for any reason whatsoever, the employee will not at any time or for any purpose, use the name of the Employer Bank in connection with his/her name or any other name in any way calculated to suggest that he/she is or has been connected with the Employer Bank business nor in any way holds himself/herself out as having or having had any such connection and will not use any information concerning the

Contd..7

Employer Bank or its business or affairs or any customer of the Employer Bank which he/she may have acquired in the course of or as incident to his employment hereunder for his/her own benefit or to the detriment or intended or probable detriment of the Employer Bank.

10. On the termination of his/her services for whatever cause, the employee shall surrender to the Employer Bank complete charge of all articles, assets, books of the Employer Bank, keys and all other things on which he/she may have control or be in his/her charge and shall also surrender documents papers, etc., over which he/she may have any dominion while as an employee of the Employer Bank.

11. The Power of Attorney of the employee shall become inoperative and he/she shall surrender the same to the Employer Bank for cancellation. If the employee commits any default in respect of any of the terms and conditions mentioned in this clause, his/ her security shall be liable to forfeit security.

12. In case the employee is covered by any Award/Settlement in force from time to time, any terms in this Agreement against the provisions of such Award shall not be binding on the employee during the operation of the Award.

IN WITNESS WHEREOF the parties hereto have set their hands in the presence of witnesses:

WITNESSES: Signature of the Employee

1…….

……. For **HARYANA GRAMIN BANK**

2…….

…….

GENERAL MANAGER

ANNEXURE - I

INDEMNITY BOND WITH SURETY

(TO BE STAMPED AS PER STATE STAMP RULES)

This Indemnity is made and executed at _____on___ day of_____ 20___ by Shri_____ S/o Shri _____ a permanent resident of _____ herein called **"Employee",** the party of the First Part**,**

AND

Shri _____S/o Shri _____ a permanent resident of _____

_____

hereinafter called **"Surety",** the party of the Second Part, in favour of Haryana Gramin Bank, a body corporate constituted under the Regional Rural Banks Act, 1976 (21 of 1976) having its Head Office at Rohtak hereinafter called **"Employer Bank".**

The terms **'Employee', 'Surety'** and the **'Employer Bank'** unless repugnant to the context shall mean and include their heirs, legal representatives, successors, executors and administrators.

WHEREAS the Employee has been selected for appointment as **_____ in the service of the Employer Bank.**

WHEREAS an Offer of Appointment containing the terms and conditions of the appointment has already been issued to the Employee vide letter No.HO/HRD/____/_____ dated _____ of the Employer Bank.

WHEREAS the acceptance of the terms and conditions of the appointment has already been communicated to the Employer Bank on _____ by the Employee.

Contd……..2.

Signature of Employee Signature of Surety

WHEREAS one of the terms and conditions of the appointment is that Employee has to serve the Employer Bank viz. **Haryana Gramin Bank for minimum period of _____Years after appointment, has to execute an indemnity with surety in favour of Employer Bank.**

NOW THIS INDENTURE WITNESSETH as under:

1. In compliance of the aforesaid condition in Offer of Appointment subject to which the Employer Bank has agreed to give appointment to the Employee, the Employee hereby undertakes to serve the Employer Bank for a minimum period of **_____Years**.
2. The party of the second part i.e. Sh._____ S/o Sh._____ agrees to stand as **Surety** for the due performance of the obligation of the Employee under this agreement of indemnity. **In case of breach of the terms of this indemnity by the Employee and** failure to indemnify the Bank, the Surety shall be jointly and severally liable to pay the amount of **Rs. _____/- (Rs. _____only) plus GST as applicable from time to time** to Employer Bank immediately on demand.
3. **The Employee further agrees and undertakes that in case he/she commits breach of the above condition and resigns from or leaves/abandons the service and/or neglects in performance of the duty assigned to him/her leading to termination of his/her service as per Rules and Regulations by the Employer Bank for all losses, costs, charges and expenses upto extent of Rs._____ lakh and pay an amount of Rs. _____ (Rs. _____ _____) only with the interest thereon @ 12 per cent per annum from the date of breach of the above till payment as liquidated damages/cost of training including on the job training, the expenses which the bank has incurred/may have to incur in recruiting another employee at his/her place, and also on account of business loss suffered/to be suffered by Employer Bank during intervening period. The employee and surety agree that assessment of liquidated damages as assessed as Rs. _____are reasonable, which they both agree to pay jointly and severally in case demand is made by the Employer Bank.**

Contd……..3.

Signature of Employee Signature of Surety

4. Notwithstanding anything contained herein above, furnishing of this indemnity will not create any right in favour of the **Employee** to continue in the service of Employer Bank for the aforesaid term of _____years, and the **Employer Bank** shall always have the right to take appropriate action against the **Employee** as per terms of the appointment letter and/or the Rules and Regulations of the **Employer Bank** as applicable, in case of commission of any misconduct by the **Employee**.

5. The amount specified above shall constitute a debt owing to the Employer Bank and shall be recoverable from the Employee and the Surety jointly and severally with interest thereon at the rate specified above till payment.

IN WITNESS whereof, the **EMPLOYEE** and the **SURETY** have put their signatures in the presence of the witnesses.

Signed and delivered by the Party of the First Part i.e. the Employee having perused and understood the contents terms of this Agreement.

Signed and delivered by the Party of the Second Part i.e. the Surety having perused and understood the contents/terms of the Agreement.

1. Witness **Employee Signature**

Name & Address: **Name & Address**

2.Witness **Surety Signature**

Name & Address: **Name & Address**

SCHEDULE – I

Declaration of Fidelity and Secrecy

Date……

Place……..

I, …… do hereby declare that I will faithfully, truly and to the best of my skill and ability execute and perform the duties required of me as _____ of the Haryana Gramin Bank, Head Office, Rohtak and which properly relate the office or position held by me in the said Bank.

I further declare that I will not divulge or allow to be divulged to any person not legally entitled thereto any information relating to the affairs of the said Bank or to the affairs of any person having any dealing with the said Bank and nor will I allow any such person to inspect or have access to any books or documents or electronic records belonging to or in possession of the said Bank and relating to the business of the said Bank or the business of any person having any dealing with the said Bank.

Signature

Name in Full: ……

Designation: …….....

Signed before me,

Signature of Witness:

Name in Full: ……..

Designation: ……...

SCHEDULE – II

Declaration to be obtained from every Employee on First Appointment.

1. Mr./Ms…… S/o.W/o.D/o …… declare as under:

   (i) That I am unmarried/a widower/widow.

   (ii) That I am married and have only one spouse living.

   (iii) That I have entered into or contracted a marriage with a person having spouse living. Application for grant of exemption is enclosed.

   (iv) To be modified.

2. I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Signature

Name: …….

Place……. S/o.W/o.D/o……...

Date: ……. Address .....

SCHEDULE-III
Form B
Declaration of Domicile

Place…….

Date……..

(1) I, the undersigned, having been appointed in the service of Haryana Gramin Bank, Head Office, Rohtak hereby declare……. (Place) in…….. (District) as my place of domicile.

(2) *The above is my place of birth

Or

*The above is not my place of birth. My place of birth is……(Place) in …….. (District) but…….. (Place) has been declared as my place of domicile for the reasons given below:

……

……..

Signature

Name in full _____

Designation_____

HARYANA GRAMIN BANK

HEAD OFFICE: ROHTAK

Name of Post: _____

Name of the Candidate: _____

Father's Name: _____

Please furnish Name and Address of two respectable persons, preferably known to the Bank and not related to you for reference:-

(1) _____

_____

_____

_____

_____

_____

(2) _____

_____

_____

_____

_____

_____

Place:

Date: Signature of Candidate

Annexure I

Acceptance of Information Security Policy

I understand that the Information Security Policies and Procedures of the Bank are hosted on the circular site/official portal, access to which will be provided to me in due course.

I undertake to read and familiarize myself with the Information Security Policies and Procedures once access is provided. In case of any queries concerning the meaning or application of the Information Security Policies or Procedures as applicable to me for my job, I know I can consult my manager or the Chief Information Security Officer, and I understand that my questions or reports to these sources will be maintained in confidence.

I further undertake to comply with the Information Security Policy and related procedures as applicable to my role, and I understand that non-compliance may attract disciplinary action as per the rules of the Bank.

Employee Name:

Employee Number:

Signature:

Date:_____

Please sign and return this form to the Human Resources Department.

Received & Accepted.

(CM - HRD)

MEDICAL REPORT

A. To be filled in by the Examinee himself

NAME :_____

FULL NAME IN BLOCK LETTERS

ADDRESS _____

1. Have you ever had any serious illness or Surgical operations? _____
2. Have you or has any member of your family ever been under treatment for tuberculosis? _____
3. Have you or has any member of your family ever suffered from medical disease, fits or epilepsy or been treated in an institution for any kind of these diseases?_____
4. Have you or has any member of your family ever been under treatment for trachoma? _____

State if "Normal" – if not give particulars of any departure from Normal :

Husband or single man

Date of Birth :

Wife or single woman

Date of Birth :

_____
(Signature of the Examinee)

B. (To be filled in by the Examining Doctor)

	Max.	Min.	Max.	Min.
a) Heart				
b) Blood Pressure				
c) Lungs				
d) Nervous System				
e) Mental condition & Intelligence				
f) Digestive Organs				
g) Skelton Bones & Joints				
h) Skin				
i) Hearing				

Contd……2.

j) Sight (i) Without Glass	R	L	R	L
(ii) With Glass (if worn)	R	L	R	L

Cause of defect of sight
k) Genito Urinary Organ
l) Urine Albumen or Sugar Present
m) Teeth
n) Deformities

HEIGHT

WEIGHT

REMARKS: In case where the Medical Examiner is unable to describe the examinee as being in perfect health and development, he/she should state the exact nature of the defect which he finds and whether it is of a permanent nature of temporary nature.

_____
_____
_____

Certify that I have this day examined the above named and that the results are as set forth and I certify that in my opinion, subject to any special observations under 'Remarks' the above named is in good health and of sound constitution and not suffering from any mental or bodily defect.

_____
(Signature & Qualifications) Address:
_____
_____
_____

DATE:

HARYANA GRAMIN BANK

HEAD OFFICE: ROHTAK

(To be filled by the Candidate on the date of reporting for duty)

INSTRUCTIONS:

1. Fill in this form in your own handwriting.
2. Give complete answers to all questions. Check () where necessary.

Reporting for joining as _____

P E R S O N A L D A T A

Full Name (in block Letters)

Present Address

Permanent Address

Contact Telephone No./Fax No._____

Age (Years)

Date of Birth

State to which you belong

Male / Female

Nationality

Religion

Height

Weight

Do you belong to Scheduled Caste or Scheduled Tribe/Other Backward Caste (OBC):

Yes / No

If Yes, State the Caste_____

MARITAL-STATUS

Unmarried/ Married /Widowed /Divorced

Number of Dependent Children Male_____ Female_____

Number of other Dependents and their Relationships:

1.

2.

3.

4.

Particulars of major illness, operation or accident, if any:

Defects in sight, hearing or speech, if any:

What is your total indebtedness, if any?

Have you ever been prosecuted (omit traffic offences) or involved in Any court proceedings? If yes, give details. Yes / No

Have you ever been debarred/disqualified by any institution from appearing at its examination, rusticated by any University or any other educational authority/institution? If yes, give details. Yes / No

Is any case pending against you in any University or any other educational authority/institution at the time of filling up this attestation form? If yes, give details. Yes / No

Have you ever been abroad Yes / No

(If yes, give name of country visited and purpose thereof)

Name of Father/Husband:

Occupation, if employed give exact

Designation and Name of Employer:

Monthly Income /Rs.

Address for purpose of emergency:

Tel. No:

E D U C A T I O N

Give Particulars of all examinations passed from Matriculation to University level.

Exam/Degree	Subjects	% Marks	Class/Div.	Position at Board/ University level	Years	School/ College	Board/ University

RESEARCH - Publication of Books, Articles, etc:

Participation in Training Camps/Seminars:

Professional/Vocational qualifications, if any:

Scholastic Honours – Fellowships and Scholarship, if any:

What subject in college interested you most and why?

LANGUAGES

Underline your Mother-tongue and proficiency in other Languages:

Speak

Read

Write

EXTRA CURRICULAR ACTIVITIES

LEADERSHIP QUALITIES

Were you a captain of a college team?	Yes / No
Were you a member/captain of a University team?	Yes / No
Were you an under officer or above in NCC?	Yes / No
Were you a secretary/president of a University Union?	Yes / No

Name your hobbies and membership of professional organizations.

If employed, give the name & address of your present & past employer (s), including HGB. Also, give your avocation, business or otherwise including employment after completion of your education upto the date of your joining the Bank.

Position held, exact designation and nature of work

Nature of business

Period	From	To
Total Salary per month	At start (Rs.)	At present (Rs.)

Note: If you have worked with more than one employer, give your employment history as above in a separate sheet of paper.

May we refer to your present employer Yes / No

List two persons other than relatives and former employers, personally known to you for more than three years, preferably known to the Bank.

1. Name : _____
   Exact Address : _____
   Occupation : _____
   Status/Designation : _____
   Business/Employment : _____
   Period known : _____

2. Name : _____
   Exact Address : _____
   Occupation : _____
   Status/Designation : _____
   Business/Employment : _____
   Period known : _____

\

G E N E R A L

Are you related to any present or ex-member of the staff? Yes / No
If yes, give name, designation, office where he is working or was last employed.

Are you connected with or related to any of the Directors of this Bank? Yes / No
Have you ever applied for working here before? Yes / No
Have you ever worked here before? Yes / No

State here any other facts about yourself that you would like to give us in support of your application. Attach a separate sheet, if required.

I certify that the information given by me in this form is correct and complete to the best of my knowledge and belief. I understand and agree that misrepresentation, falsification, or omission of material fact may be cause for rejection of my application or termination of service after employment. The statements made in this Form may be verified from each of my former employers and any other persons who may have information concerning me.

Place: Signature of Applicant
Date:

HARYANA GRAMIN BANK

HEAD OFFICE, ROHTAK

ATTESTATION FORM

(To be submitted 4 copies)

The furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification and is likely to render the candidate unfit for the 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 any time during the service of a person, his/her services would be liable to be terminated.

Affix Latest passport size photograph duly self attested.

NAME OF POST: _____ DATE OF REPORTING: _____

PLACE OF REPORTING: _____

SURNAME NAME

1. Name in full (in Block Letters) with aliases, if any,

(Please indicate if you have added or dropped at any stage any part of your name or surname).

2. Present address in full (i.e.Village, Thana and District Or House No., Lane/ Street/Road and Town).

. (a) Home address in full (i.e.Village, Thana and District Or House No, Lane/Street/ Road, Town and name of the Distt. H.O.)

(b) If originally a resident of Country other than India, the address in that country and the date of migration to Indian Union.

4. Particulars of places (with period of residence) where you have resided for more than one year at a time during the preceding five years:-

From	To	Residential address in full (i.e. Village, Thana and Distt. Or House No. Lane/ Street/ Road and Town mentioned in the preceding Column)	Name of the Distt H.Q. of the place

5.1 (a) Father's Name in full with alias, if any:

(b) Present postal address (if dead, give last address):

(c) Permanent Home Address:

(d) Profession:

(e) If in service, give designation and official address:

5.2 (a) Spouse's name in full:

(b) Profession:

(c) Designation and office address:

6. Nationality of

Father:

Mother:

Husband/Wife:

7. Exact date of birth:

Present age:

Age at Matriculation:

8. (a) Place of Birth:

(b) Distt. and State in which situated :

(c) Distt. and State to which you belong :

9. (a) Your Religion:

(b) Are you a member of Scheduled Caste/Scheduled Tribe? Yes

No

If yes, state the name thereof:

10. Educational qualifications showing place 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	Year of Passing

11. If you have, at any time, been employed, give details :

Designation of Post held or description of work	From	To	Full address of the Office, firm or Institution	Reason for leaving the job

12.Have you ever been arrested or kept under detention or bound down/fined/convicted by a Court of law for any offence, or debarred/disqualified by the Public Service Commission from appearing at its examination selections or debarred from taking any examination or restricted by authority/institution?

If answer is 'Yes' full particulars of the case detention, fine, conviction, sentence, etc. should be given.

13 Have you ever been convicted or any offences committed against woman, including conviction for dowry offences under the Dowry Prohibition Act, 1961, or under Section 304 B of IPC?

If answer is 'Yes' full particulars of the case, detention, fine, conviction, sentences, etc. should be given.

DECLARATION

I, certify that the foregoing information 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 matter they decide to do so inclusive of police enquiry into my antecedents.

SIGNATURE OF CANDIDATE

PLACE:_____

DATE: _____

HARYANA GRAMIN BANK
HEAD OFFICE: ROHTAK

IDENTITY FORM

Affix Latest passport size Photograph duly self attested

1. Full Name:
2. Designation:
3. Academic & Vocational Qualification:
4. Father's Name and Occupation:
   4(i) Name of spouse, if married:
5. Caste:
6. Complete Home Address:
7. Present Address:
8. Date of Birth:
9. Height:
10. Mark of Identification:
11. Relationship with any Employee or Director of the Bank (give names and relationship in vernacular)
12. Date of Appointment with pay:
13. Date of signed photograph:
14. Left hand thumb impression:
15. Signature of employee:

    In English

    In Hindi

16. PAN:
17. Aadhar No.
18. Initial of the employee:

I certify that the information given by me in this form is correct and complete to the best of my knowledge and belief. I understand and agree that misrepresentation, falsification, or omission of material fact may be cause for rejection of my application or termination of service after employment. The statements made in this Form may be verified from each of my former employers and any other persons who may have information concerning me.

Place:

Date: Signature of the Candidate

UNDERTAKING

(FOR EX-SERVICEMAN)

I confirm that I am entitled to the benefits admissible to ex-servicemen in terms of the Ex-Servicemen (Re-employment in Central Civil Services and Posts) Rules, 1979, as amended from time to time and I have been duly released/retired/discharged from the Armed Forces on _____ (copy of discharge book enclosed).

2. I confirm that I have not at any time prior to this appointment, secured any employment on the civil side (including Public Sector Undertakings, Autonomous Bodies/Statutory Bodies, Nationalized Banks, etc.), by availing of the concession of reservation of vacancies admissible to Ex-servicemen.

3. I understand that if my above claim is false my services will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provisions of Indian Penal Code (IPC) for submitting false undertaking.

Place :

Date : Signature of candidate

Annexure - II OBC Declaration Performa

DECLARATION/UNDERTAKING - FOR OBC (Non Creamy Layer) CANDIDATES ONLY

I, Mr./Ms._____ son/daughter of Shri _____
resident of village/town/city _____
district _____ State _____ hereby declare that I belong to the _____ community which is recognized as a backward class by the Government of India for the purpose of reservation in services as per orders contained in Department of Personnel and Training Office Memorandum No.36012/22/93- Estt. (SCT), dated 8/9/1993. It is also declared that I do not belong to persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the above referred Office Memorandum, dated 8/9/1993, which is modified vide Department of Personnel and Training Office Memorandum No.36033/3/2004 Estt.(Res.) dated 9/3/2004 and further modified vide OM No 36033/3/2004-Estt.(Res.) dated 14/10/2008 or the latest notification of the Government of India.

I also declare that the condition of status/annual income for 'Non Creamy Layer' of my parents is within prescribed limits as on financial year ending on March 31, _____.

Signature of the Candidate

Place:
Date:

Declaration/undertaking not signed by Candidate will be rejected

NOTE:

"The Appointment is provisional and is subject to the community certificate being verified through the proper channels. If the verification reveals that the claim of the candidate to belong to Other Backward Classes or not to belong to the creamy layer is false, his/her service will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provisions of the Indian Penal Code for production of false certificates."

Date:_____

FORM FOR APPOINTMENT OF BENEFICIARY

UNDER RULE 6 OF THE GRATUITY FUND

OFFICE OF THE TRUSTEES OF HARYANA GRAMIN BANK

EMPLOYEES GRATUITY FUND, H.O. ROHTAK

Name of Employee : Shri/Smt./Km._____

Date of joining the service : _____

I hereby nominate the person/persons mentioned below to be beneficiary/beneficiaries in the manner shown against the respective names.

The amount due to any beneficiary who is a minor at the time of my death should be paid to the person whose name appears in column 5.

Name and address of the beneficiary or beneficiaries	Relationship with the Employee	Whether major of minor (State date of birth in case of minor)	Proportion of benefit	Name and full address of the person to whom payment is to be made on behalf of the minor beneficiary	Sex & percentage of person mentioned in Column 5	Signature of person mentioned in Column 5 in token of consent to receive benefit on behalf of minor beneficiary
1	2	3	4	5	6	7

The Trustees will be absolved from all liability in respect of my Gratuity Account on Paying the amount to me if I am alive or the person or persons named in column No.1 above after my death. My marriage or the remarriage or the marriage or remarriage of any one of my nominees will not affect the Trustee's right to get a full and final discharge from me if I am alive and in case of my death from my nominee as mentioned in column 1 above.

This nomination is in cancellation of any earlier nomination I have made under the Rules

Signature of Employee

Signed in our presence

Witness No. 1

Name:_____

Signature: _____

Occupation:_____

Address:_____

_____

_____

Witness No. 2

Name:_____

Signature: _____

Occupation:_____

Address:_____

_____

_____

हरियाणा ग्रामीण बैंक
HARYANA GRAMIN BANK
Scheduled Bank Owned by Government

अस्तियों एवं देयताओं का वार्षिक विवरण (अधिकारियों/कर्मचारियों हेतु)
ANNUAL STATEMENT OF ASSETS & LIABILITIES
(For Officers/ Employees)

As on _____ को

.....

क्षेत्रीय/मुख्य कार्यालय-Regional/Head Office: _____

अधिकारी/ कर्मचारी का नाम /Name of the Officer/ Employee: _____

पदनाम /Designation: _____

विशिष्ट पहचान संख्या /Unique ID: _____

शाखा कार्यालय /Branch Office: _____

आस्तियाँ/ ASSETS
(क) अचल सम्पतियों का विवरण
(a) Statement of Immovable Properties

(अ) (भूमि)/LAND

भूमि की स्थिति अर्थात राज्य/जिला/गांव Location of Land viz. State/Distt./ Village	सर्वेक्षण संख्या Survey No.	सीमा Extent	वर्गीकरण Classification	कब ली गई When Acquired	कैसे ली गई How Acquired	खरीद/बाजार मूल्य Purchase/Market value	टिप्पणी Remarks
1	2	3	4	5	6	7	8

(आ) **भवन / Building**

भवन की स्थिति अर्थात राज्य / जिला / गांव Location of Building viz. State/Distt./ Village	गली एवं मकान नं Street & No. of the House	भवन का वर्गीकरण Classification of Building *	प्लिन्थ एरिया Plinth Area	कब ली गई When Acquired	कैसे ली गई How Acquired **	खरीद / बाजार मूल्य Purchase/ Market value	मासिक किराया, यदि कोई मिला Monthly rent if any received	टिप्पणी Remarks
1	2	3	4	5	6	7	8	9

* रहने का मकान, व्यवसायिक भवन
Dwelling House, Commercial Building :
**विरासत में आय से खरीदी गई
By inheritance, purchased out of earnings:

हस्ताक्षर / Signature

आस्तियों एवं देयताओं का वार्षिक विवरण
ANNUAL STATEMENT OF ASSETS & LIABILITIES
(1) (क) चल सम्पति का विवरण
(1) (A) Statement of Movable Property

कितनी राशि का बीमा है Total Amount Involved (1)	बीमा की वार्षिक किस्त Annual Insurance Premium (2)	बीमा कम्पनी का नाम Name of Insurance Company (3)	टिप्पणी Remarks (4)

स्टॉक एवं शेयर/Stock and Shares

कितने शेयर हैं Number of Shares held	शेयर का विवरण Description of Share	कम्पनी का नाम Name of Company	प्रत्येक शेयर का खरीद मूल्य Purchase value of each Share	शेयरों का खरीद मूल्य Total Purchase value of Shares	टिप्पणी Remarks
1	2	3	4	5	6

जमा/Deposits

बैंकों / वित्तीय संस्थाओं, कम्पनियों आदि में साविध जमा के रूप में कुल राशि

Total Amount of way of fixed deposits in banks, financial institutions, companies etc.

आभूषण/ Jewellery

कुल अनुमानित मूल्य / Estimated Total Value
(इसमें आभूषण के रूप में चाँदी और अन्य बहुमूल्य नग शामिल हैं।)
(This will include silver and other precious metals, precious stones forming part of jewellery.)
अनुमानित भार / Approx. Weight
वर्तमान अनुमानित बाजार मूल्य / Approx. Present Market Value

रू. 25000 / – प्रति वस्तु से अधिक की कीमत की अन्य वस्तुएँ

Other Items costing over Rs. 25000/- per piece.

विवरण Description	कब खरीदी गई When Purchased	खरीद मूल्य Purchase Value	वित्तीय स्त्रोत Source of Finance

(जैसे रेफिरिजेरटर, टेपरिकार्डर, एअर कंडीशनर, टीवी सैट, कालीन, मोटरसाईकिल, स्कूटर, रेडियोग्राफ)
(e.g. Refrigerator, Tape Recorder, Air Conditioner, T.V. Set, Carpets, Motor Car, Motor Cycle, Scooter etc.)

हस्ताक्षर /Signature

आस्तियों एवं देयताओं का वार्षिक विवरण

ANNUAL STATEMENT OF ASSETS & LIABILITIES

देयताएँ
LIABILITIES

ऋण / DEBTS

हस्ताक्षर / Signature_____

दिनांक / Date_____

नाम / Name_____

पदनाम / Designation_____

हरियाणा ग्रामीण बैंक
HARYANA GRAMIN BANK
Scheduled Bank Owned by Government

अंशों, प्रतिभूतियों, ऋणपत्रों तथा पारस्परिक निधि सम्बन्धी योजनाओं आदि में किए गए निवेश संव्यवहारों की सूचना देने वाला फार्म

FORM FOR GIVING INTIMATION FOR TRANSACTIONS IN SHARES, SECURITIES, DEBENTURES AND INVESTMENT IN MUTUAL FUND SCHEMES ETC.

1	नाम एवं पदनाम / Name & Designation	
2	Providend Fund Account No.	
3	वेतनमान एंव वर्तमान वेतनमान / Scale of Pay and Present Pay	
4	01.04.....से 31.03..... की अवधि के दौरान अंशों, प्रतिभूतियों, ऋणपत्रों तथा पारस्परिक निधियों सम्बन्धी योजनाओं आदि में किये गये प्रत्येक संव्यवहार का ब्यौरा Details of each transaction made in shares, securities, debtentures, mutual funds schemes etc. during the period 01.04…… to 31.03……	
5	उस पार्टी / फर्म का ब्यौरा जिसके साथ संव्यवहार किया गया Particulars of the firm/party with whom transaction made	
	अ) क्या आवेदक के साथ पार्टी का कोई सम्बन्ध है ? a) Is party related to the Applicant	
	ब) क्या आवेदन का आधिकारिक रूप से पार्टी के साथ कोई संव्यवहार था अथवा क्या आवेदक का उसके साथ निकट भविष्य में कोई संव्यवहार होने की संभावना है ? Did the applicant have any dealing with the party in his official capacity at any time or is the applicant likely to have any dealings with him in the near future.	
6	स) किस स्त्रोत अथवा स्त्रोतों से वित्त उपलब्ध कराया गया Source or Sources from which financed	
	अ) निजी बचतों से / Personal Savings	
	ब) अन्य स्त्रोतों से (ब्यौरा दें) / Other Sources giving details	
7	अन्य कोइ सम्बन्धित तथ्य, आवेदक जिनका उल्लेख करना चाहता हो। Any other relevant fact which applicant may like to mention.	

घोषणा / DECLARATION

मैं, एतद्द्वारा घोषणा करता हूँ कि उपर्युक्त विवरण सही है।

I hereby declare that the particulars given above are true.

दिनांक / Date : **हस्ताक्षर / Signature :**

स्थान / Place : **पदनाम / Designation :**