ATTESTATION FORM

			ATTESTATION	1101111	
			"WARNING"		"PHOTOGRAPH"
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 employment under the Life Insurance Corporation of India.					
deb sub imn aut	arred missi nediat hority	, acquitted on of the tely to the to whom th	l, prosecuted, bond do etc. subsequent to form, the details shou Life Insurance Corpora e attestation form has be ed to be a suppression o	the completion and ald be communicated ation of India or the een sent earlier, failing	Affix signed passport size (5 cm. X 7 cm. approx.) copy of recent photograph.
has form	been n con	suppression nes to notice	information has been function of any factual information at any time during the solle to be terminated.	tion in the attestation	
1.	Name in full (in block capitals) with aliases, if any		SURNAME	NAME	
	(Please indicate if you have added or dropped in any stage any part of your name or surname)				
2.	Thar	na and Distr	in full (i.e., Village, ict, or House Number, oad and Town).		
3.	(i)	Thana and Number, La	ress in full (i.e., Village, d District, or House ane / Street / Road and d name of District er).		
	(ii) If originally a resident of Pakistan, the address in that country and the date of migration to Indian Union.				
4.	than (incl	one year a uding Pakist	aces (with periods of re at a time during the p an) particulars of all pla ng the age of 21 years sh	receding five years. Ir	case of stay abroad
	F	rom	То	Residential addresses in full (i.e., Village, Thana and District, or House Number, Lane / Street	Name of the district headquarters of the place mentioned in the preceding

Trom	10	(i.e., Village, Thana and District, or House Number, Lane / Street / Road and Town).	headquarters of the place mentioned in the preceding column

5.	Relation Name		Name	Nationality by birth and / or by domicile	Place of birth	Occupation (if employed give designation & official address)	Present postal address (if dead give last address)	Permanent home address
	(i)	Father (name in full aliases, if any)						
	(ii)	Mother						
	(iii)	Wife / husband						
	(iv)	Brother/s						
	(v)	Sister/s						
		1		I.		I.	I	I

5(i). Information to be furnished with regard to son(s) and / or daughter(s) in case they are studying / living in a foreign country:

Name	Nationality (by birth and	Place of birth	Country in which	Date from which
	/ or by domicile)		studying / living with	studying / living in the
			full address	country mentioned in
				previous column

6.	Nationality		
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7.	(i)	Date of birth (in Christian era)	
	(ii)	Present age	
	(iii) Age at matriculation		

8.	(i)	Place of birth, District and State in which situated	
	(ii)	District and State to which you belong	
	(iii)	District and State to which your father originally	
		belongs	

9.	(i)	Your religion	
	(ii)	Are you a member of a scheduled caste / scheduled tribe/OBC/	
		EWS? Answer 'yes' or 'no'	

10. Educational qualifications 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

11(i).	Are you holding or have any time held any appointment under the central or
	state government or a semi-government or a quasi-government body, or an
	autonomous body, or a public undertaking, or a private firm or institution?
	If so, give full particulars with dates, of employment, up-to-date.

[To be filled in by the Candidate in his/her own handwriting Roll.No.

Pe	riod	Designation, emoluments and nature of employment	Full name and address of employer	Reasons leaving previous service
From	То			

If the previous employment was under the Govt. of India/ State Government / an Undertaking owned or controlled by the Govt. of India or a State Government / Autonomous body / University / Local body. If you had left service on giving a month's notice under 5 of the Central Civil Services (Temporary Service) Rules, 1965, or any similar corresponding rules, were any disciplinary proceedings framed against you, or had you been called upon to explain your conduct in any matter at the time you gave notice of termination of service, or at a subsequent date, before your services actually terminated?

12.	(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 bound down?	Yes / No
		(e)	Have you ever been fined by a Court of Law?	Yes / No
		(f)	Have you ever been convicted by a Court of Law for any offence?	Yes / No
		(g)	Have you ever been debarred from any examination or rusticated by any university or any other educational authority / institution?	Yes / No
		(h) Have you ever been debarred / disqualified by any Public Service Commission/Staff Selection Commission for any of their examination / selection?		
		(i)	Is any case pending against you in any Court of Law at the time of filling up this Attestation form?	Yes / No
		(j)	Is any case pending against you in any University or any other educational authority / institution at the time of filling up this Attestation form?	Yes / No
		(k)	Whether discharged/expelled/withdrawn from any training institution under the Govt. Or otherwise?	Yes/ No

12(ii). If the answer to any of the above mentioned questions 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 form

Note:				
(i)	Please also see the 'Warning' at the top of this Attestation Form			
(ii)	Specific answers to each of the question should be given by striking out 'yes' or 'no' as the case may be			

[To be filled in by the Candidate in his/her own Roll.No.			dwriting
13.	Names of two responsible persons of your locality or two references to whom you are known	(i)	
		(ii)	

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 under Life Insurance Corporation of India.

Signature of candidate
Date
Place

To be filled by the office

(i) Name, designation and full address of the appointing authority

(ii) Post for which the candidate is being considered