

POLICE VERIFICATION ROLL

Affix your recent
Photograph here
(Size 3.5cmX 2.5
cm)
SELF ATTESTED

1. Name in full (in block capital) with aliases, if any [Please indicate if you have added or dropped, at any stage, any part of your name or surname]	Surname	Name
2. Name of the Post /the service applied for and Name of the office	Directorate of Health Services, Govt. of West Bengal	
3. Present address in full (i.e. Village, Thana, Post Office and District or House number, Lane/ Street & Road PIN)		
4(a). Home address in full (i.e. Village, Thana, Post Office and District House number, Lane/Street & Road PIN) & Contact No.		
4(b). If originally a resident of Pakistan, Bangladesh, Nepal or any other country the address in that Dominion & date of Migration to Indian Union		
5. Particulars of place where you have resided for more than one year during the preceding five years:		
From	To	Residential addresses in full (i.e. Village, Thana, Post office & District or House Number, Lane/Street & Road. PIN
YEAR		
6. (a) Father's name in full with aliases	a)	
(b) Present postal address (if dead, give last address)	b)	
(c) Permanent home address	c)	
(d) Profession	d)	
(e) If in service, give designation & official address	e)	
7.i) Nationality of		
a) Father :	a)	
b) Mother :	b)	
c) Husband :	c)	
d) Wife :	d)	
ii) Place of birth of		
a) Husband (Name.....).	a)	
b) Wife :	b)	
8.a) Exact Date of Birth [To be supported by Birth Registration Certificate/Admit Card of WBBSE /any other recognized Board]	a)	
b) Present age	b)	
c) Age of Matriculation/School Final/Madhyamik	c)	
9.a) Place of Birth District & State in which it is situated	a)	
b) District & State to which you belong	b)	

10. a) State your religion

a)

b) Are you a member of a Schedule Caste/
Schedule Tribe/OBC? If the Answer is 'YES'

b)

State the name thereof [Copy of Certificate to be attached]

11. Educational qualification showing places of education with years in Schools & College :

Name of School/College with full address	Date/Yr. of entry	Date/Yr. of leaving	Exam Passed

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

Designation of post held or description of work	Period		Full address of the Office/Firm or Institution & reasons for leaving previous service
	From	To	

13. Have you ever been convicted by a Court of any offence or charge-sheeted by the Police in connection with any criminal proceeding? If so, the full particulars of the case should be given.

14. Name of two responsible persons of your locality or two reference to whom you are known :

1.
2.

I do 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 Government, I understand that submission of false information will make me ineligible for employment.

.....
(Signature of the Candidate)

Date

Place

(Certificate to be signed by a Gazetted Officer or Member of Legislature Assembly
or other authority prescribed by the appointing authority)

Certified that I have known Sri/Smt.....

.....for the lastyears.....months and

that to be best of my knowledge and belief, the particulars furnished by him/her are correct.

Date

Signature.....

Place

Designation or Status and Address (Office Seal)

Date

Signature Designation of the Issuing Officer.....
and the Name of Office with full address