**Appendix – A**

**APPLICATION FOR COMPASSIONATE GROUND APPOINTMENT**

**PART-A**

I. (a) Number, Rank and Name of the Government Servant (Deceased/Retired on medical ground / Missing) : _____

(b) Unit last Served : _____

(c) Designation of the Govt servant : _____

(d) Date of Appointment : _____

(e) Date of Birth of the Govt Servant : _____

(f) Date of Death (if while in service) : _____

(g) Date of Retirement on medical Ground : _____

(h) Total Length of service rendered : _____

(j) Whether permanent or temporary Medical category : _____

(k) Whether belonging to SC/ST/OBC : _____

II. (a) Name of the Candidate for appointment : _____

(b) His/Her relationship with the Govt servant : _____

(c) Date of Birth : _____

(d) Educational Qualifications : _____

(e) Whether any other dependent family member has been appointed on compassionate ground : _____

(f) **Home Address**.

(i) Village : _____

(ii) PO : _____

(iii) Tehsil : _____

(iv) District : _____

(v) PIN : _____

(vi) State : _____

(vii) Mobile/Phone No and Email ID :

(g) Post for which applied for :

III. **Particulars of Total Assets Left including Amount of**

(a) Family pension : _____
(with copy of Pension drawn proof)

(b) No of Dependent Children : _____

IV. Brief particulars of liabilities if any : _____

V. Particulars of all dependent family members of the Govt servant (is some are employed, there income and whether they are living together or separately)

| Ser No | Name (s) | Relationship with the Govt Servant | Age | Address | Employed or not (if employ) |
|---|---|---|---|---|---|
| (1) | (2) | (3) | (4) | (5) | (6) |
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| | | | | | |

Dated:

Signature of the Candidate

Name _____

Address _____

Tele/Mob No . _____

## DECLARATION/UNDERTAKING

1. I hereby declare that the facts given by me above are, to the best of my knowledge, correct. If any of the facts here in mentioned are found to be incorrect or false at a future date, my service may be terminated.

2. I hereby also declare that I shall maintain properly the other family members who were dependent on the Government servant/member of the Force as mentioned against **I (a) of Part-A** of the application form and in case it is proved at any time that the said family members are being neglected or terminated.

Dated:

Signature of the Candidate

Name _____

Address _____

Tele/Mob No. _____

## COUNTERSIGNED BY GAZETTED OFFICER/ VILLAGE PRADHAN/ SARPANCH

(Seal and signature)

Dated:

**SPECIMEN OF UNDERTAKING CERTIFICATE REGARDING DETAILS OF COMPASSIONATE GROUND APPOINTMENT GRANTED TO DEPENDENT FAMILY MEMBERS**

1. I, Mr/Miss/Mrs ..... son/daughter/wife of Ex No ..... Rank ..... Name ..... of ..... Assam Rifles have been applied for Compassionate Ground Appointment rally for the year 2026.

2. I hereby undertake and certify that the my following family members have already been granted Compassionate Ground Appointment and serving Assam Rifles/Retired from Assam Rifles:-

2.1 .....

2.2 .....

2.3 .....

**OR**

2.4 No one of my family member is appointed against Compassionate Ground Appointment as on date except me for which I have been applied for Compassionate Ground Appointment rally for the year 2026.

3. I further undertake that above information are true to the best of my knowledge. In case of above information's are found false at any time even at later stage, department will hold right to dismissed me from service any time with the decision of Assam Rifles Competent authority, and I will refund the Govt expenses partly/wholly as deemed fit by the Department/Government.

Signature of the candidate

Name :_____

Husband/Father's Name :_____

Trade :_____

Vill :_____

PO :_____

Place : Dist :_____

State :_____

Date : Pin :_____

**COUNTERSIGNED BY GAZETTED OFFICER/ VILLAGE PRADHAN/ SARPANCH**

(Seal and signature)

Dated: