TELANGANA GRAMEENA BANK HEAD OFFICE: HYDERABAD

Personnel Dept. Date: 10.02.2023

The list of provisionally selected candidates who appeared IBPS RRB CWE-XI examination for the post of Office Assistant (Multi Purpose) conducted by IBPS, Mumbai in August and September 2022 is displayed in our website from 10.02.2023.

The candidates are advised to report at the following address on the dates mentioned in the list along with the Original Certificates, Documents, ID proof etc., as mentioned in the model Provisional Selection letter which is enclosed.

TELANGANA GRAMEENA BANK
HEAD OFFICE
H.NO. 2-1-520, II & III FLOOR
VIJAYASRI SAI CELESTIA
STREET NO.09, NALLAKUNTA
SHANKERMUTT ROAD
HYDERABAD-500 044

All the Candidates shall be required to execute a surety bond agreeing to pay Rs.1,00,000/-(Rupees One lakh only) in the event of his/her Resignation from the Bank's service during the probation period. This is in addition to the provisions of Telangana Grameena Bank (officers and employees) service Regulations 2010, Chapter-II, Regulation No. 10.

The proformae of the following are also displayed.

- 1. Bio data
- 2. Antecedents/ Character Certificate
- 3. Medical Certificate.
- 4. Declaration to be submitted by the OBC candidates.
- 5. Declarations & undertakings to be submitted by the candidates.

(For any queries, please contact 9491042025 between 10 A.M. to 5 P.M.)

Note: No individual Provisional selection letter will be sent to the candidates separately.

Sd/-

(K.P.SHOBHA RANI)
GENERAL MANAGER-I

TELANGANA GRAMEENA BANK HEAD OFFICE: HYDERABAD

Date: 10.02.2023

PROVISIONAL SELECTION LIST FOR THE POST OF OFFICE ASSISTANT WHO APPEARED FOR IBPS RRB CWE-XI HELD DURING AUGUST & OCTOBER 2022 AND INTERVIEWS IN NOVEMBER 2022.

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
1		254302538 6	BALA SRAVAN
2		254300976 1	MUSIDIPALLI PRASANNA KUMAR
3		254301028 8	SWAPNA KUMARY
4		254301116 5	JAYASRI THOTAWAR
5		254301835 6	PAMMI SANDEEP KUMAR
6		254301415 8	INALA VINAY KUMAR
7		255300014 8	VINAY TUMMALA
8		254301096 4	BAGADI CHANDRASEKHAR
9		254300299 4	PEERUNAYAKAM SHARATH CHANDRA
10	01 st March,	254300587 8	GORRE KARTHIK
11	2023 (Wednesday	254301460 6	GANGADHAROLLA RAVIKANTH
12) 10:00 A.M.	257300217 7	NALLA PREETHAM MADHAV
13		254301725 9	NAGOL TEJASWINI REDDY
14		257300108 3	SRUJANA KANDAGATLA
15		254300981 3	BADA SUDHEER KUMAR
16		256300093 6	GAMPALA MANASA
17		256300166 8	PALANKI SAI SINDHURI
18		254301396 9	PEMELLE SANDHYA
19		255300078 1	DAMARA PREM KUMAR
20		254301419 8	SATYADEEPA TALLAPANENI
21		254302675 1	RACHAMALLA POUL RAJU

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
22		254300967 8	DASARI AJAY
23		254301325 5	SANKURU SUSHEEL TEJA
24		256300227 4	BODA CHANDAN NAYAK
25		254302050 5	ESLAVATH SAI KISHORE
26		254301003 4	PRAVEEN D
27		254301502 1	B SAYI PRATAP REDDY
28		254301899 9	THUMMALA BALAJI
29		254301891 2	YETTI VISLY YACOB
30		254300949 3	PEETLA SUBHASH
31		254301282 2	NVSS VENU GOPAL
32	01 st March,	254302552 1	DYDA SHANKER REDDY
33	2023 (Wednesday)	254302059 5	RAMESH BORRA
34	02:00 P.M.	254301420 5	KATIKILA GEETHIKA
35		254301939 1	K HAREESH
36		254300029 6	KUMARAN APPANA
37		254302427 8	BATHINA MANEESHA
38		254300077 3	T SURYA
39		254301827 6	SABHAVAT SRINIVAS
40		254302463 3	JARUPULA NOUSHILAL
41	01 st March,	254302237 0	MUDIREDDY SADANANDA REDDY
42	2023 (Wednesday	254302615 2	SRIRAMOJU NAGASREEJA
43) 02:00 P.M.	255300241 3	YERROJU VINAY KUMAR
44		254302408 0	VUTLAPALLI SATYA NARAYANA
45		254301285 4	VANJARAPU BHANOJI RAO
46		255300069 5	PALTHI MADHURI

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
47		254302678 8	NERELLA PAVITHRA
48		256300161 8	SHAIK UZMA KOWSAR
49		254300507 2	GIDUTHURI SOMA SEKHAR
50		254300348 5	DURGA PRASAD VAKADA
51		254300000 6	KOJGEWAR WAARVEER
52		256300458 4	CHELLURI VINAY KUMAR
53		257300023 7	CHENNOJU SAI DEEPAK
54		256300097 8	YALAMARTHI RAVI VARMA
55		254302142 1	VARALA LIKHITH SAI KUMAR
56		254301137 2	BOLLIKONDA VINAY KUMAR
57		254301327 5	KANKIPATI HARSHA VARDHINI
58		254302033 0	MANCHIKALAPATI SAI MOUNIKA
59		254301681 8	KARAKAVALASA SRIKANTH KUMAR
60		256300405 6	DANDURI POOJA
61		254300437 8	PILLI PAVAN KUMAR
62		254300864 8	MAKANI SYAM SUNDHAR
63		254301210 8	VENKATARATNAM YASARLA
64	02 nd March, 2023	256300302 9	NANDIGALA SUMANTH
65	(Thursday) 10:00 A.M.	254300088 4	SARANYA CHOWDARY PARVATHANENI
66		254301368 5	CHADALAWADA V N S S MANOJ KUMAR
67		254301955 0	BEGARI SHIVARAJU
68		257300031 4	DUNDE SRIKANTH
69		255300122 9	KOMMITI RADHIKA REDDY
70		254302085 6	PUTTA SANDEEP
71		254301410 1	THATIKAYALA SAI KRISHNA PAVAN

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
72		254301072 0	BALAMREDDY SIREESHA REDDY
73		255300190 9	KATKAM SANTHOSH
74		256300083 9	GANGIREDLA TANUJA
75		256300386 8	BUSA HARI BABU
76		254302636 8	SHANMUKHARAO DONKA
77		254300378 5	MAHENDAR SANUGOMULA
78		256300554 1	MULLAPATI LAXMI PRASANNA
79		254300926 3	ABDUL SHUKUR SYED
80		254302157 4	MATTA CHAITANYA
81		254301226 7	DHARAVATH NAVYA
82		254301585 1	RATNAVAT SHIVA
83		254300809 4	B JANARDHAN
84		254300477 7	MURIKINATI SAI PRADEEP KUMAR
85		254301156 4	P PAVAN RAO
86		254301515 4	KANDUKURI MOUNIKA
87		254302477 0	AGATI SRINIVASULU
88		254300235 0	GOUTHOM BHALABAYA
89		254301941 2	GANDHARI PRANAY KUMAR
90	02 nd March, 2023	254301729 1	BACHANABOINA NAVYA
91	(Thursday) 02:00 P.M.	254301330 5	PEDDAPALLY KOUSHIK
92		255300163 0	MUNNANGI DATTA SAI KEERTHI
93		254300352 5	BAMMIDI BHAVANI SHANKAR
94		254302012 1	KATTA PRANAY
95		254302438 5	BAGADI SAI SWETHA
96		254302563 3	GOPI MAHESH

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
97		254301197 9	NYALAPALLY SRIKANTH
98		254302675 6	ANKOLU RAMANAGA VEERAVENKATA SATYANARAYANA
99		256300423 6	SRINIVASARAO IDDUBOINA
100		254302251 6	KALIVARAPU MONICA
101		254302716 6	KONDAPURAM MANOJ KUMAR
102		256300153 6	MALOTHU PRASANNA
103		254301890 9	PHANI SUHAS MULA
104		254302619 3	MANENI HEMANTH
105		254302767 8	MAMIDIPELLI KALYANI
106		256300426 0	AVUDURTHY MAHENDER
107		254301033 1	YASARAPU BHARATHI
108		254302124 2	B SOWMYA REDDY
109		254301338 6	KAKI TEJA VASANTH KUMAR
110		254301843 7	DEGAVATH ANURADHA
111		254302527 2	VENKATESH DASI
112		256300062 8	RAJESH KRISHNA CHITTA
113		254301912 8	MARTHALA GURU PRIYANKA
114		256300011 3	PRADEEP TAMADA
115		254302764 2	MANCHIKANTI CHANDRA LOKESWARA REDDY
116	03 rd March, 2023 (Friday)	254300004 7	INALA ANIL KUMAR
117	(Friday) 10:00 A.M.	254302099 3	NALLI RAJ KUMAR
118		256300011 8	SAYYAD AZEEM
119		254301476 5	RAGALA HARISH
120		254301182 6	SOMALARAJU PAVAN KALYAN
121		255300196 4	NOOTHI SURESH

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
122		254300837 0	PULI RAJU
123		256300221 9	BIJJAM VENKATA REDDY
124		254301433 3	KOTESWARA RAO MAGULURI
125		254301119 8	CHALLA VENKATA CHARAN REDDY
126		256300434 4	PRAHARAJU H R S N S SARMA
127		254300684 9	VEMURI KALKI VENKATA SUBBARAO
128		254300251 4	IMRAN SHAIK SANUGONDLA
129		254302132 6	BOLIMERA JASHUVA
130		254300716 0	G MADHUSUDHAN REDDY
131		254300141 9	HEMENDRA CHOKKAKULA
132		254301081 2	GANTA WILLIAM RAJ
133		254302047 4	PEDDADA RAM KUMAR
134	03 rd March, 2023	254302127 0	SAGAR BOKAM
135	(Friday) 10:00 A.M.	256300162 3	SANKARA RAO PEDDINA
136		257300133 3	CHENNABOINA VAMSHI
137		254301023 5	SHETTY SAITEJA
138		254302812 3	RICHA
139		254301189 9	OBILI LOKESWAR
140		254300865 9	SIRISHA ADELLI
141		254301055 8	BEHARA SUDHEER KUMAR PATRO
142	03 rd March,	254301303 9	SABHAVAT SWARNA
143	2023 (Friday) 02:00 P.M.	254302104 7	KUKKAMALLA DEEPAK
144		255300221 0	RAVALI THATIKONDA
145		256300249 3	KINJARAPU TRIVENI
146		254302159 4	KOTTAPALLI NARENDRA VARMA

SL NO.	DATE & TIME OF REPORTING	ROLL NO.	NAME OF THE CANDIDATE (Sri/Smt./Ms.)
147		254302016 8	TAPPARI SISHINDRA REDDY
148		256300040 5	BATHULA SIRISHA
149		254301605 2	MANDODDI RAHUL CHAKRAVARTHI GOUD
150		254301308 1	BEEMA MADHUKAR
151		254300575 1	KARNATI HARI HARAN REDDY
152		257300235 2	CHINTA SATYA CHAKRADHAR
153		256300192 6	ILAPOGU SYAM
154		254300677 0	SHAIK NAZEER BASHA
155		254301797 6	GURRAM NAVEEN KUMAR
156		254300328 8	BHUKYA MANJULA
157		254300858 2	BINGI GIRISH KUMAR
158		254302368 5	SIVANNARAYANA KANAKAPUDI
159		254300139 1	BALASUBRAHMANYAM CHEVALA
160		254301994 0	S VINOD KUMAR
161		254301529 7	DIMMITI RAMESH
162		256300206 6	TIRUVAIPETA ANIL
163		256300505 4	KOLLAMUDI BRAHMA REDDY
164		255300176 4	PARUMALA BHAVANI
165		256300349 8	SHAIK JANI BASHA
166		257300156 9	VIRAT MAROJU

Sd/Date: 10.02.2023 GENERAL MANAGER-I



TELANGANA GRAMEENA BANK

(Sponsored by State Bank of India)
Head Office, # 2-1-520, 2nd Floor, Vijayasri Sai Celestia, Street No.9
Shankermutt Road, Nallakunta, Hyderabad, Telangana. -500 044.

Website: www.tgbhyd.in Phone : 040-27600849
E-mail: cmper@tgbhyd.in FAX : 040-27662623

Lr.No.Gr-I/2022-23/ Date: 10.02.2023

Name & Roll No.:

Sir / Madam,

MODEL PROVISIONAL SELECTION LETTER

We are pleased to inform that you have been provisionally selected for appointment for the post of **Office Assistant (Multi Purpose)** in our Bank, based on the CWE-XI held by IBPS, Mumbai.

- 1. Please note that <u>your appointment is subject to production of following original certificates at the time of your reporting on the date indicated herein:</u>
 - a. Educational qualifications, experience, etc., certificates mentioned in your application, starting from 10th class.
 - b. Proper relieving certificate, no objection certificate from your present employer (in case you are presently employed).
 - c. Character and antecedents certificates (**2 copies**) from any two respectable persons not related to you and Bio-data (**4 sets** -Page Nos.4 to 8) duly filled (not Xerox copies) and Declaration (in case of OBC candidates only).
 - d. Conversion certificate issued by the competent authority and a copy of the gazette notification for the change in your name, if any.
 - e. Relevant Caste certificate/ PWD certificate in original in the prescribed format issued by the competent authority in proof/ support of the claim for the category under which you have been provisionally selected.
 - f. Latest nativity/ Residential Certificate issued by the Competent Revenue Authority.
 - g. Aadhaar Card & PAN Card.
 - h. Further, submission of certificates/letters, etc., if any, not produced at the time of interview (if applicable).
 - i. Two sets xerox copies of all the above documents duly attested by self.
 - Undertakings, Surety Bond, Affidavit & Declarations which are enclosed, to be submitted by the candidates.
 - Medical Fitness Certificate, as per proforma, obtained from <u>not below the rank of **Assistant Civil Surgeon in Govt. Hospital**</u>
- 2. Please note that you are provisionally selected for appointment in the bank as an Office Assistant (Multi Purpose) relying on the particulars furnished by you in your application and other certificates / testimonials submitted. In case it is found that any of the particulars / certificates / testimonials furnished by you are found / proved to be false or incorrect at a later date, your provisional selection will be cancelled or if you are appointed by the Bank, you will be summarily dismissed from the service and liable for any other action deemed fit by the Bank.

You are advised to report to the undersigned on the date and time mentioned in the list along with original certificates / testimonials as mentioned above, at our Head Office.

Yours faithfully,

Sd/-

GENERAL MANAGER-I



TELANGANA GRAMEENA BANK HEAD OFFICE :: HYDERABAD

Please affix latest colour passport size Photograph and sign across the photo

REVISED BIO-DATA CUM ATTESTATION FORM

(THE CANDIDATE SHOULD PROPERLY FILL THE ATTESTATION FORM WITH HIS / HER OWN HAND WRITING)

	ME							
ИE	8 <u></u>						_	
	(b)	Designation of the cand quota / Compassionate		0 10	131			
	(i)	Designation			Cate	egory		
	(ii)	Place of working						
	(iii)	Date of Appointment _				ID No _		
	(iv)	Direct recruitment			Ex-serviceman			Compassionate
2.	Detai	ils of addresses:						
			a) Present			b) Pe	ermanen	t
1	House/A	partment/Flat No						
1	Name of	Apartment						
	Street &	Road						
	Village 6	& Mandal						
(City / Di	istrict						
	State .							
1	Pin Cod	e .						
AA	DHAR	NO		I	PAN CARD NO			
0-	ntact F	Phone Numbers						

•	alars of places whe ation form.	re you have reside	ed during the <i>preceding five years</i> from the date of f	illing up of
S.NO	From (Month/Year)	TO (Month/Year)	Residential Address in full (i.e., House / Apartment / Flat Number, Apartment / Street / Colony and Road, Village, Mandal and District / City)	Police Station and District
1.			District City)	
2.				
3.				
4.				
5.				
b) Profess	in full with aliases sion rvice, give designa			
	t postal address give last address)	La	ouse No. ne Name	
			reet & Road llage/ Mandal Dist	
		Sta	ate & PIN Code	
e) Permane	ent House address		ouse No. ne Name	
			reet & Road	
		Vi	llage/ Mandal Dist	
5. Nationa	lity of :	Sta	ate & PIN Code	
	9 191	ther		
	(b) M	-4		

4.

Course	e		Name and full address school/College (village / N District/City)		Date of entering (month	Date of leaving (month &	Examin passed (Group Inter/	with	Police Station and District
9.		since 15	onal Qualifications showing 5th year of age (Please enclos regular or distances / corr	espondence).	opies of Stu	ıdy Certificat	es and	indicate v	whether
	1	Percenta	ge of Disability:						
	(c) If	you are	handicapped, please tick app	propriate box:		OC		VI	НІ
				Specify nam	ne of the cas	te			
		Schedul	ed Caste	Schee	duled Tribe			OBC	,
		(b)	Are you a member of Scheo	duled Caste /	Scheduled T	ribe / Other	Backwa	ard Class	?
8.		(a)	Religion			_			
		(0)	you belong						
		(b)	District and State to which						
7.		(a)	Place of birth, District and	State					
		(c)	Age at SSC / Matriculation					_	
		(b)	Present Age					_	
6.		(a)	Date of birth of the applica	ant					

Course	Name and full address of the school/College (village / Mandal / District/City)	Date of entering (month & year)	Date of leaving (month & year) PG, etc)	Examination passed with (Group i.e., Inter / Degree/ Diploma/ PG)	Police Station and District
SSC /Matriculation					
Inter/ Diploma					
Graduation					
Post-Graduation					
Other Qualification					

Designation of post held or description of work	Peri	V 0.02004000000	Full Address of the Office, Firm or Institution.	Resigned to the post? If so, please	Have you been a any time dismisse
	From	то	institution.	give details.	removed from
Preventive detention law a side by the Appellate C (Note: if detained, convicted, d communicated immediately to may be, failing which it will be	s for any offer Court if appeal ebarred etc., su the concerned I e deemed to be	nce? Whether so led against. bsequent to the co Department or the suppression of fa	ompletion and submission authority to whom the	ed in the Court of App on of this form, the details Attestation Form has beer	s should be n sent earlier, as the c
conviction, sentences and deten	ition should be	given.			
2. Name and complete add	ress of two res	sponsible persoi	ns of your locality to	whom you are known	or two
				whom you are known	or two
			blood relatives)	whom you are known Reference II	or two
ferences to whom you are kn		s shall not be	blood relatives)	•	or two
ferences to whom you are kn		s shall not be	blood relatives)	•	or two
ferences to whom you are kn ame of the reference ouse / Flat No		s shall not be	blood relatives)	•	or two
ferences to whom you are kn ame of the reference ouse / Flat No ame of Apartment		s shall not be	blood relatives)	•	or two
ame of the reference ouse / Flat No ame of Apartment reet & Road		s shall not be	blood relatives)	•	or two
ame of the reference ouse / Flat No ame of Apartment reet & Road illage & Mandal		s shall not be	blood relatives)	•	or two
ame of the reference ouse / Flat No ame of Apartment creet & Road illage & Mandal ity / District		s shall not be	blood relatives)	•	or two
Jame of the reference Jame of the reference Jame of Apartment Treet & Road Village & Mandal City / District		s shall not be	blood relatives)	•	or two
2. Name and complete addreferences to whom you are known are known are known are sold and a sold are s	own. (Person	s shall not be Reference I	blood relatives)	Reference II	

DECLARATION SHOULD BE SIGNED BY THE CANDIDATE

- I hereby declare that the statements made in this form are true to the best of my knowledge and belief.
- 2. I am married / unmarried and have only one wife living (delete which is not applicable).
- 3. I am fully aware that furnishing of false information or suppression of any factual information in the Attestation Form would be a disqualification and is likely to render me unfit for employment under the Government.
- 4. I am also fully aware that if it comes to notice at any time during my service that false information has been furnished or that there has been suppression of factual information in the Attestation Form, my services would be liable to be terminated solely on this ground.

Place: Date:		Signature of the candidate
	Right Thumb Impression	

CERTIFICATE TO BE SIGNED BYA GAZETTED OFFICER OR MEMBER OF LEGISLATURE OR OTHER AUTHORITY AS PRESCRIBED BY THE APPOINTING AUTHORITY

Certified that I have known Sri / Si	mt / Kum
Son / Daughter / Wife of	for the
last years months and to the b	est of my knowledge and belief, the particulars
furnished by him / her are correct.	
Place: Date :	(Signature)
	Name & Designation with seal

Photo of the candidate attested by Gazetted Officer MLA/ Others with seal

ANNEXURE

(CHARACTER CERTIFICATE)

1.	Name of the candidate	:		
2.	Applied for the post of	:		
3.	Is the candidate known to you	: Yes / No		
4.	If so, kindly state the period	: Year	months	
5.	Whether to the best of your knowledge and information			
	a. The candidate has at any tim taken active part in politicsb. He was ever arrested / prose kept under retention or convictly court of law.	cuted /		
6.	Is the family of the candidate	s known to you :		
7.	Has any member of the candidate convicted by a court of law	e's family ever been arre	ested / kept / kept under detention	on or
8.	Are you aware of any circums would render the candidate unsui appointment in a banking institution	table for		
9.	Is the candidate related to you	ı :		
l c	ertify that the above information is	correct to the best of	my knowledge and belief and t	hat Sri / Smt.
Ms	S/c	/D/o/W/o	R/o	bears
a g	ood moral character.			
		Signature:		
Dla	ace :	NAME :		
	te:	Occupation :		
υa	ι ο .	Mobile No. :		
		Postal Addres	e.	
		i Usiai Auui Es	J.	

TELANGANA GRAMEENA BANK MEDICAL EXAMINATION REPORT

(To be obtained from not below the rank of Assistant Civil Surgeon in Govt. Hospital)

PART - I: PERSONAL STATEMENT OF THE CANDIDATE

To be filled in by the candidate before presenting the form to the Medical Officer.

1.	Name in full (Surname First)	:	
2.	Category of Post	:	
3.	Address	: - : - : _	
4.	Date of Birth	:	DD MM YYYY
5.	Married/Single/Widow/Widower	:	
6.	Personal History	:	
a)	Whether any time you have vomited blood or coffee colour or had bleeding from anus with stools or suffered with pain in Abdomen if so. What was the diagnosis of your doctor or suffered with prolong fever or jaundice etc. Give details if yes.		: Yes/No
b)	Any history of cough with expectoration blood in sputum, breathlessness or chest pain with cough. Give details if yes.		: Yes/No
c)	Any history of feeling heart beats chest pain associated with sweating, spell of fainting, breathlessness at rest or chest discomfort discoloration of lips or nails on exercise, joint pains, swelling of legs or breathlessness disturbing your sleep.		: Yes/No
d)	Any history of passing blood or stones in the urine or burning during and after passing urine or difficulty in passing urine or any discharge after passing urine.	:	Yes/No
e)	Any history of fits (convulsions) or Paralysis of any part of the body (i.e. any limb or face) or deviation of mouth.	:	Yes/No
f)	Any history of allergy of skin or loss of sensation of any part of body or sense or hot and cold. Do you any time suffered with leprosy or discharge after urination. Ulcers or growths on private parts. Do you have more than one sex partners regular or occasional.	of:	Yes/No
g)	Have you suffered from defects in hearing or		: Yes/No

eye sight. Give details

:: 2 ::

h) Details of serious illness/injuries sustained : Yes/No

by accident or otherwise. Give details

i) Details of surgical operation undergone. : Yes/No

j) Is there any other item in your medical : Yes/No

history which you have not already

mentioned

7. FAMILY HISTORY:

i) Heart disease and blood pressure. If yes relationship. : Yes/No

ii) Chronic Cough with expectoration with weight : Yes/No

loss (Tuberculosis). If yes relationship

iii) Kidney disease. If yes relationship : Yes/No

iv) Cancer. If yes relationship : Yes/No

v) Any other serious aliments. If yes relationship : Yes/No

vi) Diabetes. If yes relationship : Yes/No

8) FOR FEMALE CANDIDATES ONLY

i) Menstrual History (Monthly Periods) : Regular / Irregular

ii) First date of last menstrual period :

iii) Any evidence of Pregnancy : Yes / No

I hereby declare that the above statements are correct to the best of my knowledge and that any incorrect/suppressed information will render me liable for termination of my services in the Bank.

Place : Date :

>) SIGNATURE OF THE CANDIDATE

SIGNED IN MY PRESENCE

SIGNATURE OF THE MEDICAL EXAMINER

NOTE:

The candidate may please note that they would have no right to appeal against the decision of the Medical Examiner. If, however the Bank is satisfied on the basis of the evidence produced before it, of the possibility of an error of judgment in the decision of the Medical examiner, it is open to the Bank to allow an appeal to a Medical board which will be constituted by the Bank. Such evidence should however, be submitted by the candidate within one month of the date of communication in which the decision of the Medical Examiner is advised to him/her. If the setting up of the Medical Board is decided by the Bank the candidate will be called upon to deposit the expenses of medical board. If found medically fit by the board this deposit would be refunded to the candidate. It will otherwise be forfeited. The report of the Medical Board is final and will not be subject to review by any other special list Panel or Board.

TELANGANA GRAMEENA BANK MEDICAL EXAMINATION REPORT

Affix recent

passport size

photograph

PART - II REPORT OF THE MEDICAL EXAMINER

duly attested Name of the Candidate Category of the Post by Medical Examiner : Good ______ Fair_____ Poor___ 1. General Development : Thin _____Average_____ Obese_____ a) Nutrition b) Best weight _____Kg. When DD ____MM ____YYYY leight ____ Cms. c) Any recent change in weight : _____Kgs. Weight: ____ Kgs. : Normal/Raised d) Temperature e) Girth of chest : ____ Cms i) After full inspiration : _____ Cms ii) After full expiration f) Identification Marks : ABM/Scar ABM/Scar 2. Skin: Any obvious disease : Yes/No : Clear /Blocked 3. Ears: Inspection Hearing: Right Ear : Normal/Defective Left Ear : Normal/Defective 4. Glands Normal/Enlarged : Thyroid Normal/Enlarged 5. Conditions of Teeth : All healthy & Intact + missing cavity 6. Respiratory System : Normal/Abnormal Does physical examination reveal: Yes/No anything abnormal in respiratory organs? If yes, explain fully 7. CIRCULATORY SYSTEM a) Heart: Any organic lesions: Yes/No ____Pmt Pulse Rate b) Blood Pressure: Systolic :_____mm of Hg Diastolic

8).	ABDOMEN :	GirthCms Tender	ness Present/Absent
		Hernia	
a)	Palpable	: Liver	_ Spleen
		Kidney	Tumors
b)	Hemorrhoids	: Fist	ula
9.	NERVOUS SYSTEM: disabilities	Indication of nervous	or mental : Yes/No
10.	Loco-Motor System	n: Any abnormality	: Yes/No
11.	. Genito Urinary Sys	tem: Any evidence o : Yes/No	f hydrocele varicocele etc
a)	Physical appearance	ce : CLEAR / HAZ	ΥΥ
b)	Albumin	: ABSENT / PR	ESNET
c)	Sugar	: ABSENT / PF	ESENT }Report Enclosed
d)	Casts	: ABSENT / PF	ESENT
e)	Cells	: WNL / ABNO	RMAL
12.	Report of X-Ray E	xamination of Chest	: Enclosed - NORMAL / ABNORMAL
13.	Report of the Bloo	od Examination/HIV T	est : Enclosed - NORMAL / ABNORMAL
14.	Report of Full Abd	omen Ultrasound Test	: Enclosed - NORMAL / ABNORMAL
15.	Is there anything of the candidate him / her unfit discharge of his/h services for whice candidate?	likely to render for the efficient ner duties in the	: Yes / No
16.	Findings:		
		niner should record one of the following	:
i)	FIT		:
ii)	UNFIT on account o	f	:

NOTE:

Female candidates while undergoing medical tests, if Pregnancy is detected; they are to be found TEMPORARILY UNFIT by the Civil Surgeon. Such candidates will be considered for Appointment after delivery and on production of a 'Fitness certificate' from the Civil Surgeon. The posts will be kept as vacant and unfilled till such time. (To avail this facility, the pregnant candidates have to give a request letter in

writing along with the Medical certificate from the Surgeon and obtain permission from the Competent Authority).

	CIC	NATURE OF THE	MEDICAL	EVAMINED		
PLACE: DATE:	1	NATURE OF THE NAME : DESIGNATION :	MEDICAL	EAAMINER.		
*Such candidate months of confine		to contact the	Bank fo	r fresh medica	l examination a	after three
REPORT BY THE O	PHTHALMOLOGIS	T: (To be obtaine	ed from r	not below the rai	nk of Assistant C	<u>ivil</u>
Surgeon in Govt. H	lospital)					
i) Name of the pa	tient :					
ii) Category of the	post:					
Acuity of Vision	Naked Glasses	With Glasses		Strength of Gl	asses	
			Sph	Cyl	Axis	
Distant Vision R.E. L.E.						
Near Vision R.E. L.E.						
Hypermetropia (Manifest) R.E. L.E.						
1) Any disease of	the eyes	:				
2) Night blindness	1	:				
3) Defect in colou	r vision	:				
4) Field vision		:				
5) Visual acuity		:				
6) Fundus examina	ation	:				
PLACE : DATE :			OP	INATURE OF THE HTHALMOLOGIST TH SEAL.		

DATE :

DECLARATION TO BE SUBMITTED BY THE OTHER BACKWARD CLASSES CANDIDATES SEEKING RESERVATION AS OBC

<u> </u>			Son/da	ughter o	Ť
Shri			Resident	of villa	age/
town/city	D	istrict			
State		hereby	declare that I b	elong to	the
		Community w	hich is recog	nised a	s a
backward class by the Gover	nment of India for the	e purpose of rese	ervation in serv	ices as	per
orders contained in Depart	tment of Personnel	and Training (Office Memora	andum	No.
36012/22/93-Estt.(SCT) dated	08.09.1993. It is also	declared that as	s on 09.11.202	20, I do	not
belong to persons / sections (C	Creamy Layer) mention	ed in column 3 of	the Schedule t	o the ab	ove
referred Office Memorandum d	ated 08.09.1993.				
Place: Dated (Signature of the candidate)	ate)				

Place : HYDERABAD

Date:

The General Manager-I, Telangana Grameena Bank Head Office, Nallakunta HYDERABAD.

Sir/Madam,

<u>UNDERTAKING</u>

I hereby undertake that I shall join the services of the Telangana Grameena Bank as an
(post) and shall continue to serve the Bank. I shall not be entitled
to apply for or to accept the offer of any other appointment or appointments, while I am in the
service of the Bank, without the knowledge and permission of the Bank and the Bank may
withhold the permission without assigning any reason.
Yours faithfully,
Signature:
Name:
Roll No.:

Place : HYDERABAD Date :

The General Manager-I, Telangana Grameena Bank Head Office, Nallakunta HYDERABAD.

Sir/Madam,

l,	S/o / D /o W/o	joined as an
	(post) agree to abide by the bank's Information Systen	n Security policy. I
undertake to	Ο,	
i) Keep all	relevant data of the bank as confidential	
ii) Access o	only the relevant data that is required for the job	
iii) Follow th	e acceptable usage policy of the bank	
iv) Perform	the responsibilities and comply with the requirements specified in	
the Bank	policies.	
	d the importance of information and agree to take all reasonable precaution assets of the bank. I also understand that non-compliance with Bank posaction.	-
Signature	:	
Name		

TELANGANA GRAMEENA BANK HEAD OFFICE: HYDERABAD

Declaration to be bound by the Staff Service Regulations:

		Place : Hyderabad Date :	
I, hereby declare that I have re Officers and employees Servic the said regulations :			
Name in full	:		-
Nature of appointment	:		-
 Date of appointment 	:		-
 Signature 	:		-
Witness	:		-
Date			

SCHEDULE-I (See regulation 5(4) (ii))

DECLARATION OF MARITAL STATUS

I, Sri /Smt./Kum	S/o / W/o / D/o
declare as under:	
(i) That I am unmarried/ a widov	ver/ a widow
(ii) That I am married and have o	nly one spouse living.
	ontracted a marriage with a person having a spouse living. I may be asis of ground given below. Application for grant of exemption is
Ground:	
2. I, solemnly affirm that the above	declaration is true and I understand that in the event of the
declaration being found to be incorreservices.	ect after my appointment, I shall be liable to be dismissed from
Date:	Signature:
bate.	SCHEDULE - II (See regulation 19)
<u>DEC</u>	LARATION OF FIDELITY & SECRECY
I,	, do hereby declare that I will faithfully truly
and to the best of my skill and abili	ty execute and perform the duties required of me as an Officer or
Employee of the TELANGANA GRAME me in the said Bank.	ENA BANK and which properly relate the office or position held by
	divulge or allow to be divulged to any person not legally entitled he affairs of the said Bank or to the affairs of any person having any
dealing with the said Bank and nor w	vill I allow any such person to inspect or have access to any books or
documents or electronic records be	elonging to, or in possession of the said Bank and relating to the
business of said bank or the business	of any person having any dealings with the said Bank.
Signed before me,	Signature : Name in Full : Designation :
Signature:	
Name in full:	Place:
Designation:	Date :

SCHEDULE- III (See Regulation 73)

DECLARATION OF DOMICILE

		Place: Date :	
, the undersigned, ha	ving been appointed in t	he service of the Telangana Gra	ameena Bank hereby
declare	(Place)	(Mandal) in	(district) as my
place of domicile.			
1. * The above is my pla	ce of birth		
or			
* The above is not r	ny place of birth. My p	olace of birth is	(place)
(M	andal) in	(district) but	(place) has
been declared as my pla	ice of domicile for the reas	cons given below.	
Signature			
Name in full	:		
Designation	:		
Nature of appointment	:		
Date of appointment	:		

^{*} Strike whichever is not applicable

(NOTARISED AFFIDAVIT TO BE EXECUTED ON A NON-JUDICIAL STAMP PAPER OR FRANKING OF VALUE RS.200/-)

FORM OF AFFIDAVIT

Ι, _		S/o		, aged about
	years, belonging to	category,	religion,	country,
R/	0			do hereby
so	lemnly state on oath as follows	3:		
1.	That I am competent to gi Regulations of the Bank.	ve this affidavit. That	I undertake to abide	by the Rules and
2.	That I am residing at the abwere no civil or criminal case any State or Central Court/Co	s pending against me i		
3.	That I passed the	qualifying examin	ation (graduation) in tl	ne month and year
4.	Further, I declare that I hav Prohibition Act, 1961 or any of Offenders Act, 1958. In ca- and/or suppression of mater terminated.	criminal offence under se the particulars furnis	any other law/released shed by me are found to	under the Probation be false or not true
5.	I certify that the particulars f knowledge and belief. I am a employment in the Bank. I a from time to time.	not aware of any circu	mstance which might in	mpair my fitness for
			Depo	nent
S	olemnly affirmed and signed b	efore me on this the	_day, month	, 2023 at
Ν	lotary			
(5	Signature with seal)			

DECLARATION

ΙN	Mr./Ms./MrsS/o./D/o./W/o.
	Prob. Officer/ Office Assistant (Multipurpose) hereby
de	clare that
1.	I have not resorted to any unfair practices in the written test conducted by IBPS for the above post.
2.	The Certificates of my Educational Qualifications submitted to the Bank are genuine.
3.	The Caste Certificate produced by me is genuine and issued by the competent authority.
4.	I submit that there are no criminal cases against me
5.	I further declare that
A)	I was previously employed in organization as
	(cadre) from and relieved from the said organization or
	I am herewith enclosing the original relieving letter and experience certificate.
B)	I hereby declare that I am not employed anywhere as on date.
C)	I hereby declare that I do not have any self employment / I have wound up my Self employment unit.
ar ac	submit that the above information is true and correct to the best of my knowledge and belied and if any information furnished above is false, I am liable for disciplinary action /any appropriate action that will be initiated by the bank and Bank may forfeit my selection/appointment to the bove post in the Bank.
	Signature of the Candidate ace: Name: ate: Address:

(NOTARISED SURETY BOND TO BE EXECUTED ON A NON-JUDICIAL STAMP PAPER OR FRANKING OF VALUE RS.200/-)

SURETY BOND

This Surety Bond is executed by Sri/Smt./Ku	m	
S/o.W/o.D/o	, aged	years, R/o
hereinafter calle	ed surety N	lo.1; and
Sri/Smt./Kum		_, S/o.W/o.D/o
agedyears, R/o	,hereina	after called Surety No.2.
IN F	FAVOUR C	F
Telangana Grameena Bank, with represented by its Chairman, hereinafter call		Office at Hyderabad, Telangana State ployer Bank in the following terms.
WHEREAS, the Surety No. 1 here Assistant (Multi Purpose) vide letter No bank indicating certain terms and conditions accepted the terms and conditions of appoint	and the S	Surety No. 1 having received the same has
WHEREAS, the Surety No.1 in fulfill Assistant (Multi Purpose) has accepted the Employer Bank during the period of probation as may be made by the employer be accepted.	e condition ation of or	e year or such other extended period of
WHEREAS, the Surety No. 1 in purso the bank on probation for the term stipulat himself being Surety No. 1 and another inde 1,00,000/- (Rupees One Lakh only) in favour	ed, has fu ependent s	surety being Surety No. 2 for a sum of Rs,
WHEREAS, the above named Surety following terms:	No. 1 and	1 2 hereby execute the surety bond on the
SURETY NO.1 (Name & Signature)	_	URETY NO.2 Iame & Signature)

- That Surety No. 1 undertakes to bind himself in terms of the above mentioned appointment letter to continue in the service of the employer bank during the said period of probation of one year which may be extended by such other period as decided by the employer bank.
- 2. That, the Surety No. 1 undertakes that, in the event of his deciding to leave the service of the employer bank voluntarily by resigning from the service on any ground whatsoever, including joining the service of any other organization during the period of such probation period, undertakes to pay a sum of Rs. 1,00,000/- (Rs. One Lakh only) towards liquidated damages to the employer bank.
- 3. That, the Surety No. 1 further undertakes that the said amount of liquidated damages as agreed to be paid, shall be payable to the employer bank after obtaining due permission from the Chairman of the Bank for leaving the services by showing appropriate reasons and by making the payment of the above said amount of liquidated damages.
- 4. That, the Surety No. 1 hereby agrees and binds himself to the extent that during the period of probation in the service of the employer bank, he shall not apply for any job in any other organization without obtaining prior permission from the employer bank.
- 5. That, the Surety No. 1 hereby undertakes to be abide by the Telangana Grameena Bank (Officers & Employees) Service Regulations, 2010 and such other rules and regulations of the Employer Bank as are applicable to all the employees of the bank and as amended from time to time.
- 6. That, the employer bank in the event of receiving any such request in writing from the Surety No. 1 seeking permission to leave the employment of the bank, by paying the amount of Rs.1,00,000/- (Rs. One Lakh only) towards liquidated damages will issue a No Objection Certificate along with the relieving letter upon being satisfied of fulfillment of all the conditions stipulated here in above by Surety No.1.

SURETY NO.1 (Name & Signature)

SURETY NO.2 (Name & Signature)

7. That, the employer bank will be at liberty to terminate the probation of the Surety No.1 thereby removing him from the service of the bank during the period of probation by giving one month notice or payment in lieu thereof, by invoking Regulation of 9(2)(a) of Telangana Grameena Bank (Officers & Employees) Service Regulations 2010. In such an event of termination of the probation, the Surety No.1 shall not be entitled to any compensation

or whatsoever except for the notice pay as stipulated above in lieu of one month notice.

- 8. That, the Surety No.1 hereby undertakes to fulfill all his obligations towards the employer bank in the event of his deciding to leave the service of the bank during the period of probation/extended period of probation as stated above before being relieved from the service of the employer bank.
- 9. That, the Surety No.2 herein above binds himself to the employer bank with regard to the payment of the amount of Rs.1,00,000/- (Rs. One Lakh only) towards liquidated damages in case of failure of Surety No. 1 for making such payment in the event of his voluntarily abandoning, discontinuing or leaving the service of the bank during the period of probation for any reason whatsoever.
- 10. That, the Surety No. 1 and 2 herein above do hereby jointly and severally undertake the liability of the payment of liquidated damages of Rs.1,00,000/- (Rs. One Lakh only) in the event of Surety No. 1 leaving the services of the employer bank voluntarily or by abandoning the job during the bond period as stipulated above.

The parties herein above sign and execute this Surety Bond on their own free will and volition in the presence of the following witnesses, whose names are subscribed hereunder on this the _____ day of _____2023 at Hyderabad.

SURETY NO.1 (Name & Signature)

SURETY NO.2 (Name & Signature)

WITNESS: (Name & Signature)

1)

2)

TELANGANA GRAMEENA BANK HEAD OFFICE; HYDERABAD.

PLACE	E : HYDERABAD.
Date :_	

To Chairman Telangana Grameena Bank Head Office HYDERABAD.

UNDERTAKING

I undertake that I shall discharge my duties upon posting to branch/ Office situated anywhere in the jurisdiction of the Bank.

2. I declare that I will not bring outside influence for Postings/Transfer/Disciplinary matters/ Appointments and other matters. In the event of failing to do so, I may be liable for action under the Regulation No.35 of Deccan (now Telangana) Grameena Bank Staff Service Regulations, 2010.

Yours fait	hfully,
Signature):
Name	<u>:</u>
Post	:
Roll No	

TELANGANA GRAMEENA BANK HEAD OFFICE; HYDERABAD.

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DECLARATION

I, the undersigned hereby declare that the following are my family members who are wholly dependant on me and their Annual income is mentioned against their names;

SI No.	Name Sri/Smt./Ms.	Age	Relation-s hip	Occupatio n	Annual Income (in Rs.)	PAN No.	AADHAR No.

Signature :			
Name	<u>:</u>		
Post	: <u></u>		
Roll No	•		