

MEDICAL FITNESS CERTIFICATE

I do hereby certify that I have examined Sri / Kumari/ Smt. _____
_____ Son/Daughter /
Wife of Sri _____ a candidate for
employment in the _____
department and can not discover that he/ she has any disease, constitutional
affection or badily infirmity communicable or otherwise except _____
_____.

I do not consider this a disqualification for Employment in the office as a
_____. The candidates age is according to
his own statement _____ year and by appearance about
_____ years.

I have further to certify the following findings on my medical examination :-

1. Height : _____ Feet _____ Inch
2. Weight _____ l.bs.
3. Vision : RE LE With Glasses RE LE
Distant :
Near :
4. Urine Colour _____ Specify Gravity _____

Albumen - Present/ Nill Sugar Present / Nill

Signature of Medical Officer
(not below the rank of Assistant Civil Surgeon)

DECLARATION BY CANDIDATE

I _____ candidate for
employment in the _____ Department
of the Govt. of Bihar to hereby declare that I have any time been pronounced unfit
for Govt. Employment by the medical board or any other duly constituted medical
authority.

Date : _____

Signature of the candidate

SECURITY BOND

BIHAR STATE POWER (HOLDING) COMPANY LTD., PATNA

**Security Bond by Newly Recruited _____
(Name of the post)**

1. Know all men by this Security Bond that I _____
_____ (Employee) confirmly hold and Bond up to Bihar State Power Holding Company Limited (Employer) constituted under provisions of Company Act, 1956 read with Electricity Act, 2003 and hereinafter referred to as Company with the following consideration.

2. Whereas I _____ S/O
_____ Resident of
_____ P.O. _____
P.S. _____ District _____ have
been appointed as _____ vide company's letter
no. _____ dated _____ on dt. _____.

3. On being appointed as _____ the provision enumerated in the Recruitment Policy of company and other cadre rules shall be binding and enforceable for the purpose of regulating the terms of employment at post held.

4. And whereas according to the Recruitment Policy of company all the direct recruits shall be on probation for the period of 3 (three) years from the date of appointment and the continuation and confirmation there to shall be subject to satisfactory performance of service entrusted and rendered.

5. And whereas also in terms of the provisions of the company, the employee probationary shall be bound with the employer, in the event of resignation/ voluntarily by the employee, absenting himself/ herself from duty and/ or quitting the company's service within three years from the date of completion of trainings to refund to the company Rs. 50,000/- (Fifty thousand) only.

6. So that I _____
S/O _____

Resident of _____ P.O.
_____ P.S. _____ District

_____ do hereby firmly bound and undertake that I shall refund to company, the entire cost (pay & allowance etc.) incurred by the company on the training under the company subject to a maximum of Rs. 50,000/- (Fifty thousand) only in the event of leaving the organization before completion of three years on resignation or otherwise or remaining absent from the service at my own accord within three years from the date of completion of training.

7. And whereas in furtherance of the job as probationer employee I _____ hereby along with two sureties undertake all right and liabilities of probationer/ employee what so ever arise shall be the exclusive liabilities of the probationer/ employee along with the sureties.

8. The sureties namely (i) Sri _____
S/O _____ P.O. _____ P.S.
_____ District _____ and (ii) Sri
_____ S/O _____

P.O. _____ P.S. _____ District _____ jointly & severally shall be responsible & liable for the payment or for liquidating the liability in above mentioned. The two sureties liability shall be liquidated or recovery from the personal property of the sureties. Surety with full Signature:-

1. _____

2. _____

Signature of Witness with full address

(i) _____

(ii) _____

Deponent

Affidavit

The Executive Magistrate/Notary Public

Place -----

I -----S/o----- aged about -----
/resident of----- P.S. -----Post Office-----Town-----
----- Distt. ----- State----- do hereby solemnly affirm and declare as follows:-

- 1- That I am unmarried (if married) (Strike out).
- 2- That I am married and I have only one living spouse (if not married) (strike out).
- 3- That I have not accepted any dowry (if married) or will not accept any dowry (if unmarried).
- 4- That I have not been convicted by any court of law.

Declaration:-

That the aforesaid contents are read over to me and are true in my belief.

Deponent.

Note:- To be sworn before an Executive Magistrate or a Notary Public.