

Compassionate Appointment in NCB for Group "C" & "D"

- 1. Applications for compassionate appointment are under consideration in NCB. In this regard, the applicants are requested to submit the following documents:
 - (a) Self-attested copy of educational qualification certificate
 - (b) Self-attested copy of Date of Birth certificate
 - (c) Death certificate of the deceased NCB employee
 - (d) Address proof
 - (e) Consent letter from other dependents duly filled in (format enclosed)
 - (f) Affidavit (format enclosed) duly filled in and signed by Magistrate/Notary public
 - (g) Undertaking regarding marital status (format enclosed)
 - (h) Self-attested copy of the bank statement of last six months of all the dependents of the deceased government employee
 - (i) A copy of PAN cards of all the dependents of the deceased government employee
- 2. Please note that if it is found that the Affidavit contains false/incorrect information, it shall lead to rejection of application for consideration for offer of employment under the compassionate category. Further, if after the issue of offer of appointment consequent upon joining duty, if any content of the Affidavit is found to be false/incorrect, it shall lead to cancellation of the offer of appointment and / or termination of services forthwith. It is therefore, advised to carefully read and understand the contents of the Affidavit and ensure that only correct information is provided, duly supported by documents/records which can be verified. For any clarification/assistance in preparing the Affidavit, Name of Officer with phone number, may be contacted.
- 3. The applicants are required to submit the requisite documents and produce the original of the same in NCB Ballabgarh Unit latest by 31.03.2024 (by 5:00 p.m.).
- 4. How to Apply: The candidates are requested to download the documents from compassionate appointment link (available at NCB website) and submit the same duly filled to the above postal address with recent passport size photograph to The Director General, National Council for Cement and Building Materials, 34 KM Stone, Delhi Mathura Road (NH-2), Ballabgarh, Haryana 121004 giving all details along with self-attested documents.
- 5. Any amendment or any further information shall be uploaded on NCB Website only.
- 6. Further to the above documents, the candidate shall be liable to submit any document at later stage, if required by NCB in this regard.



Co	sent letter from the other dependent family members of Late
Sh	i/Smt.:
De	ignation:NCB.
Su	ject: Application for appointment under the Compassionate category.
Re	erence: Application datedfrom
1.	Shri, Son/Daughter/Wife of Late
	Shri/Smt(deceased NCB servant) has applied for grant of
	appointment on compassionate grounds to the dependent family members of the NCE
	Servant dying in harness.
2.	We, the other dependent family member of the deceased NCB servant Shri/Smt
	,have no objection if the said appointment is given to
	the applicant Shriand hereby give our consent for the same.
	ne, address and dated signature of all the dependent family members of the deceased B servant (other than the applicant)
110	ber vant (other than the appreaut)
(1)	
(2)	
(3)	
(4)	

AFFIDAVIT

I,			, s	son/daught	ter/widov	w of Shri/Smt	
(deceased		NCB		Se	ervant),	Resid	
							ication for grant of
		-	_		-	•	NCB servant (dying
in har	ness) or who	o is retired or	n med	ical groun	ds vide n	ny application date	d
	I hereby so	olemnly affir	m and	d declare a	s follows	S:	
1.	That, I am	one of the dep	pende	=			CB servant Shri/Smt. ly members, whose
	_	iven below hassionate cat	_	ven conse		-	grant of appointment
2.				-	-	member of the dec	eased NCB servant g the applicant):
			-		-	such applicant, deta occupation should	ails of marital family also be provided).
S.No.	Name & address of the dependent family member	Relationship with deceased	Sex	Date of Birth/age	Marital Status	Whether employed, if yes, the details, whether in Govt./ Semi Govt./Pvt./ Regular/Temporary/ Daily wages	Monthly income/earning from all sources including employment, business, rental income etc.
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
		Total monthly	incom	e of the famil	v (includin	g annlicant)	

S No.	Name		Date	e of Birth/Age		ntional fication	Occupation
1.							
2.							
3.							
4.							
5.							
(i) (ii) (iii)	or mysel No. of 2-whe No. of 4-whe	novable/ immovable or any other dependence of the control of the c	endent fa oter/Moto eep etc.)	mily member of t			
				т.	<u>, </u>		1
Location	on & details	Plot area (in sq.	ft.)	Built up are (in sq.ft.)	self	ether used for -occupation rented out	If rented out, monthly re income
Locatio	on & details		Area (in a	acres)		Monthly inco agriculture lan	me, if any, front
(v)	Commercial 1	property:					
` /	Commercial j		Area (in a	acres)		Monthly incon	
` /			Area (in a	acres)			ne from commerc y
` /			Area (in a	acres)			
That, th	e following auted lending a	are the details and/or dependent in gencies to be give	of liabil	lities in the na	ame of NCB ser	deceased NCI	y B servant Shri/ s/Govt. loan/loans
That, th	on & details e following	are the details and/or dependent nugencies to be give	of liabil	lities in the na of the deceased N cluding private/fa ount (as on d	ame of NCB ser	deceased NCl vant (bank loans ans which are no	B servant Shri/s/Govt. loan/loanson-verifiable, as concuments enclose
That, thother rep	e following auted lending a	are the details and/or dependent in gencies to be give	of liabil	lities in the na of the deceased N cluding private/fa	ame of NCB ser	deceased NCl vant (bank loans ans which are no	B servant Shri/s/Govt. loan/loanson-verifiable, as concuments enclose
That, thother repeter of the control	e following auted lending a NCB servant Nature of le Bank loans Govt. loans	are the details and/or dependent in gencies to be give it. Dan payable payable	of liabil nembers on, but ex	lities in the na of the deceased N cluding private/fa ount (as on d	ame of NCB ser	deceased NCl vant (bank loans ans which are no	B servant Shri/s/Govt. loan/loanson-verifiable, as concuments enclose
That, thother repdeath of S.No. (i)	e following auted lending a NCB servant Nature of le	are the details and/or dependent in gencies to be give it: Dan payable payable mother lending a payable mother lending	of liabil nembers on, but ex	lities in the na of the deceased N cluding private/fa ount (as on d	ame of NCB ser	deceased NCl vant (bank loans ans which are no	B servant Shri/s/Govt. loan/loanson-verifiable, as c
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That, the other rep death of S.No. (i) (ii) (iii)	e following auted lending a NCB servant Nature of lo Bank loans Govt. loans Loans fro agencies pay	are the details und/or dependent in gencies to be give i: payable payable m other lending yable	of liabil nembers on, but ex	lities in the na of the deceased N cluding private/fa ount (as on d	ame of NCB ser	deceased NCl vant (bank loans ans which are no	B servant Shri/s/Govt. loan/loanson-verifiable, as concuments enclose

• 0 0	I hereby also declare and undertake that on getting appointment under the compassionate category, I we support the other dependents/family members of the deceased Shri/Smt					
(Applicant) Deponent						
	Verification: Verified at Delhi, this day					
(Applicant) Deponent						



UNDERTAKING

I, Shi	ri / Smt	son / daughter / wife of Late
Shri	/ Smt resident of	
		(full address).
Hereb	y undertake that:	
i)	I am married since (Date of marriage), and the names my spouse and
	children are as follows.	
	a)	
	b)	
	c)	
ii)	I am unmarried.	
**Plea	ase strike off either (i) or (ii) whichever is not applied	cable.
Place		Signature
Date		Name



ANNEXURE PROFORMA REGARDING EMPLOYMENT OF DEPENDENTS OF NCB SERVANTS DYING WHILE IN SERVICE/RETIRED ON INVALID PENSION

PART-A

I.	(a)	Name of the NCB ser	vant					
		(Deceased/retired on	medical ground)			•••••	• • • • • • • • • • • • • • • • • • • •	
	(b)	Designation of the No	CB Servant					
	(c)	Whether it is MTS (e		or not?				
	(d)	Date of Birth of the N						
	(e)	Date of death/retirem						
	(f)	Total length of Service						
	(g)	Whether permanent of						
	(h)	Whether belonging to						
II.	(a)	Name of the candidat						
	(b)	His/Her relationship						
	(c)	Date of Birth	with the Iveb Berva		•••••			
	(d)	Educational Qualifica	ntions					
	(e)	Whether any other						
	(0)	appointed on Compas						
III.		Particulars of total as						
111.	(a)	Family Pension	sets left illefuding a					
		D.C.R. Gratuity						
	(b) (c)	G.P.F. Balance						
			og (ingluding Dogtol	I ifo Incus	onaa			
	(d)	Life Insurance Policie Moveable and Immo					•••••	
	(e)	therefrom by the fam		aiiiiuai iii	Joine earned			
	(f)	C.G.E. Insurance amo						
	(g)	Encashment of leave	Juint					
	(b)	Any other assets						
	(11)	Total					•••••	
IV.		Brief particular of lia	hilities if any				•••••	
V.		Particulars of all depe		ers of the	NCB			
٧.		(if Some are employe						
		together or separately		wiictiici ti	cy are fiving			
		together of separatery						
C1	l Ni	(ama (a)	Dalationship	1 4 00	A d dmaga		Employed on not if	
Sl.		Tame (s)	Relationship	Age	Address		Employed or not if	
Sl. No.		ame (s)	with NCB	Age	Address		employed particulars of	
		Tame (s)		Age	Address		employed particulars of employment and	
		Tame (s)	with NCB	Age	Address		employed particulars of	
		Tame (s)	with NCB	Age	Address		employed particulars of employment and	
		fame (s)	with NCB	Age	Address		employed particulars of employment and	
		Tame (s)	with NCB	Age	Address		employed particulars of employment and	
No.			with NCB	Age	Address		employed particulars of employment and	
No.	Declar	ration/Undertaking	with NCB servant				employed particulars of employment and emoluments	
No.	Declar 1. I her	ration/Undertaking reby declare that the fac	with NCB servant	ve are, to t	he best of my l		employed particulars of employment and emoluments correct. If any the facts herei	
No.	Declar 1. I her mention	ration/Undertaking reby declare that the fac oned are found to be inc	with NCB servant ets given by me above correct or false at a f	ve are, to to	he best of my l	may be tern	employed particulars of employment and emoluments correct. If any the facts hereininated.	
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Email ID



PART-B

(TO BE FILLED BY OFFICE IN WHICH EMPLOYMENT IS PROPOSED)

(I)	(a)	Name of the candidate for Appointment	
	(b)	His/Her relationship with the NCB Servant	
	(c)	Age (date of birth), education qualification and experience, if any	
	(d)	Post (Group C) which employment is Proposed	
	(e)	Whether there is vacancy in that post within the ceiling of 5% prescribed under the scheme of compassionate appointment.	
	(f)	Whether the post to be filled is included in the Central Secretariat Clerical Service or not	
	(g)	Whether the relevant Recruitment Rules provide for direct recruitment.	
	(h)	Whether the candidate fulfils the requirements of the Recruitment Rules for the post	
	(i)	Apart from waiver of Employment Exchange/Staff Selection Commission procedure what other relaxation are to be given	
	(ii)	Whether the facts mentioned in Part-A have been verified by the Office and if so, indicate the records	
	(iii)	If the NCB servant died/retired on medical grounds more than 5 years back, why the case was not sponsored earlier	
	(iv)	Personal recommendation of the Head of the Department in the Ministry/Department/Office. (With his signature and office Stamp/seal)	