

**Through E-mail  
Registered Post**



कार्यालय मुख्य आयुक्त  
Office of the Chief Commissioner  
सीजीएसटी एवं केन्द्रीय उत्पाद शुल्क(जयपुर परिक्षेत्र),जयपुर  
CGST & Central Excise (Jaipur Zone), Jaipur  
(कैंडर कंट्रोल यूनिट)

F. No. GCCO/II/31/14/2026-Admn

Date: As e-signed

**सूचना / NOTICE**

**विषय:** कर्मचारी चयन आयोग, संयुक्त स्नातक स्तरीय परीक्षा, 2025 के माध्यम से **कार्यकारी सहायक** के पद के लिए अभ्यर्थियों का दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा के स्थान और तिथि की सूचना - संबंधित।

**Sub:** Candidates selected through Staff Selection Commission, Combined Graduate Level Examination, 2025 to the post of **Executive Assistant** - Intimation of date and venue of Document Verification & Medical Examination – reg.

\*\*\*\*\*

केंद्रीय अप्रत्यक्ष कर एवं सीमा शुल्क बोर्ड (CBIC), नई दिल्ली ने ई-मेल दिनांक 03.07.2026 के माध्यम से कर्मचारी चयन आयोग द्वारा आयोजित संयुक्त स्नातक स्तरीय परीक्षा, 2025 के परिणामों के आधार पर केंद्रीय वस्तु और सेवाकर अंचल, जयपुर में **कार्यकारी सहायक (Executive Assistant)** के पद पर 1 अभ्यर्थी को दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा हेतु आवंटित किया है।

Central Board of Indirect Taxes and Customs (CBIC), New Delhi vide email dated 03.07.2026 has assigned 1 candidate for the post of **Executive Assistant** to CGST & Central Excise (Jaipur Zone), Jaipur to conduct his documents verification and medical examination based on the result of the Combined Graduate Level Examination, 2025 conducted by Staff Selection Commission.

2. इस संबंध में **अनुलग्नक 'ए'** में दर्शाए गए अभ्यर्थी को निर्देश दिया जाता है कि वे **अनुलग्नक 'ए'** में उनके नाम के समक्ष दर्शाए गए स्थान पर निर्धारित तिथि एवं समय पर दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा हेतु उपस्थित होना बिना किसी चूक के सुनिश्चित करें। अभ्यर्थी को सलाह दी जाती है कि वह दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा में सम्मिलित होने के लिए कम से कम 3 दिनों के लिए अपने यात्रा कार्यक्रम की योजना बनाए। दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा की प्रक्रिया, जोन के नामित प्राधिकारी द्वारा डोजियर की प्राप्ति एवं सत्यापन के अधीन रहेगी।

In this regard, the candidate figuring in **Annexure 'A'** is directed to report for Document Verification/Medical Examination at the place mentioned against his name in the Annexure-A on the scheduled date and time without fail. Candidate is advised to plan his itinerary for at least 3 days so as to attend DV and Medical Examination. The process of Document Verification and Medical Examination is subject to receipt and verification of dossier by the designated authority in the Zone.

3. अनुप्रमाणन प्रपत्र विधिवत एवं पूर्ण रूप से भरकर (हस्तलेख में) दस्तावेज सत्यापन/स्वास्थ्य परीक्षा के समय **तीन प्रतियों में** बिना किसी चूक के अधोहस्ताक्षरी को प्रस्तुत किये जाने चाहिए।

The Attestation Form, **in triplicate**, duly filled in all respects (by hand only), should be produced at the time of document verification/medical examination to the undersigned without fail.

4. अभ्यर्थी को निर्देश दिया जाता है कि वह दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा के समय निम्नलिखित दस्तावेजों की (मूल प्रतियाँ) इन दस्तावेजों की स्व-प्रमाणित तीन प्रतियों के साथ अवश्य रूप से प्रस्तुत करे:

The candidate should bring the following documents (**in original**) along with **3 sets of self attested photocopies** of the same at the time of Document Verification and Medical Examination:

- क) जन्म तिथि दर्शाते हुए मैट्रिक/हाईस्कूल प्रमाण-पत्र ।
- a) Matriculation / High School Certificate showing Date of Birth.
- ख) शैक्षणिक योग्यता के समर्थन में शैक्षणिक योग्यता प्रमाण-पत्र ।
- b) Academic Certificates in support of Educational Qualification.
- ग) अनुसूचित जाति / अनुसूचित जनजाति / अन्य पिछड़ा वर्ग के मामले में निर्धारित प्रपत्र में जाति/समुदाय प्रमाण-पत्र ।
- c) Caste/ Community Certificate in case of SC/ST/OBC in the prescribed form.
- घ) विकलांग व्यक्ति (दिव्यांगजन) अभ्यर्थी के मामले में प्रमाण-पत्र ।
- d) Certificate in case of Person with disabilities (Divyangjan) candidate.
- ङ) ई.डब्ल्यू.एस. अभ्यर्थी के मामले में आय और संपत्ति प्रमाण-पत्र (वित्तीय वर्ष 2025-26 के लिए वैध, वित्तीय वर्ष 2024-25 की आय के आधार पर जारी किया गया) ।
- e) Income and Assets Certificate for EWS Category Candidate (Valid for the financial year 2025-26 issued on the basis of Income for the financial year 2024-25).
- च) केंद्र या राज्य सरकार के दो अलग-अलग राजपत्रित अधिकारियों या वृत्तिकाग्राही मजिस्ट्रेट से चरित्र प्रमाण-पत्र (मूल में 3 सेट, कम से कम दो वर्ष के लिये) ।
- f) Character Certificate from **two different Gazetted** officers of the Central or State Government or Stipendiary Magistrate (**3 sets in original for minimum 2 years**).
- छ) केंद्र या राज्य सरकार के राजपत्रित अधिकारी या वृत्तिकाग्राही मजिस्ट्रेट से पहचान प्रमाण-पत्र (मूल में 3 सेट, कम से कम दो वर्ष के लिये) ।
- ग) Identity Certificate from a Gazetted officer of the Central or State Government or Stipendiary Magistrate (**3 sets in original for minimum 2 years**).
- ज) वर्तमान में केंद्र सरकार/ राज्य सरकार, स्वायत्त निकाय और सार्वजनिक क्षेत्र के उपक्रम के तहत किसी भी कार्यालय में कार्यरत होने की स्थिति में वर्तमान नियोक्ता से दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा में उपस्थित होने के लिए अनापत्ति प्रमाण-पत्र इस सूचना के सन्दर्भ में प्राप्त किया जाना है ।
- i) NOC to attend DV and Medical Examination from present employer in case the candidate is presently employed in any of the offices under the Central Government/State Government, Autonomous Body, and Public Sector Undertaking. The certificate should be obtained with reference to this Notice.
- झ) आधार कार्ड और पैन कार्ड ।
- j) Aadhar card and PAN Card.
- ञ) 3 से.मी. x 4 से.मी. आकार की 7 नवीनतम रंगीन फोटो, जिनमे से 3 फोटो अनुप्रमाणन-पत्रों पर चिपकाए जाने हैं ।
- k) 7 Coloured passport size recent photographs of size 3cm x 4cm, out of which 3 are to be pasted on Attestation Forms.

5. दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा के लिए निर्धारित तिथि को उपस्थित नहीं होने की स्थिति में यह माना जायेगा कि अभ्यर्थी विभाग में नियुक्ति का इच्छुक नहीं है तथा उसके आवंटन को निरस्त कर दिया जायेगा।

In the event of not reporting on the prescribed date for the Document Verification and Medical Examination, it will be presumed that candidate is not interested in accepting the offer of appointment in the department and his nomination will be treated as cancelled.

6. अभ्यर्थी के लिए पंजीकृत डाक (Registered Post) द्वारा अलग से सूचना भेजी जा रही है। भेजे गए सूचना-पत्र के न मिलने पर भी अभ्यर्थी उनके नाम के समक्ष उल्लिखित तिथि पर दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा हेतु उपस्थित हो सकता है। अभ्यर्थी संलग्न सत्यापन प्रपत्रों को विभागीय वेबसाइट [cgstjaipur.gov.in](https://cgstjaipur.gov.in) से डाउनलोड कर सकता है और विधिवत भरे गए विविध प्रपत्रों को दस्तावेज सत्यापन में उपस्थित होने के समय प्रस्तुत कर सकता है।

Separate intimation to the candidate is being dispatched by Registered Post. The candidate may attend the DV and Medical Examination on the dates mentioned against his name even in case he does not receive the dispatched copy of intimation letter. The candidate may download the enclosed attestation forms and submit the duly filled forms at the time of attending documents verification. All forms along with this Notice may be downloaded from departmental website <https://cgstjaipur.gov.in>.

7. अपरिहार्य परिस्थितियों में दस्तावेज सत्यापन एवं स्वास्थ्य परीक्षा की तिथियों में बदलाव किया जा सकता है। अतः अभ्यर्थी को सलाह दी जाती है कि वह अंचल/आयुक्तालय की वेबसाइट व अपने ई-मेल को नियमित रूप से देखता रहे।

In the event of unavoidable circumstances, the Document Verification and Medical Examination may be postponed/ rescheduled. Accordingly, candidate is advised to keep checking the website of Zone/Commissionerate and his individual email.

Digitally signed by  
SHARMA SURYAPRAKASH GULABCHAND  
Date: 09-07-2026 18:37:57

(Sharma Suryaprakash Gulabchand)  
(शर्मा सूर्यप्रकाश गुलाबचंद)  
Joint Commissioner /  
संयुक्त आयुक्त

सेवा में / To

अभ्यर्थियों को (अनुलग्नक 'ए' पर दी गई सूची के अनुसार)

The candidates (As per the list enclosed as Annexure 'A')

**संलग्न / Enclosed:**

1. अनुलग्नक 'ए' / Annexure 'A'
2. सत्यापन प्रपत्र / Attestation Form
3. पहचान प्रमाण पत्र / Identity Certificate
4. चरित्र प्रमाण पत्र / Character Certificate
5. वैवाहिक स्थिति प्रमाण पत्र / Marital Status Certificate

**ANNEXURE-A**

<b>(Document Verification/Medical Examination to be conducted from 23.07.2026 to 25.07.2026)</b>					
<b>VENUE:</b>		<b>CGST &amp; Central Excise (Jaipur Zone), Jaipur, New Central Revenue Building, Statue Circle, C-Scheme, Jaipur - 302005 (Rajasthan)</b>			
<b>S. No.</b>	<b>Roll No.</b>	<b>Name</b>	<b>Post</b>	<b>DV Date</b>	<b>Reporting Time</b>
1	2404006670	YOGESH SINGH SHEKHAWAT	Executive Assistant	23.07.2026	9:00 AM

# ATTESTATION FORM

## POST : EXECUTIVE ASSISTANT

<div style="border: 1px solid black; padding: 5px; width: 100%;">                 Affix signed                  Passport size (3                  cms X 4 cms)                  approx. Copy of                  recent photograph             </div>		<p style="margin: 0;"><b>“WARNING</b></p> <p style="margin: 0;">1. The furnishing of false information or suppression of any factual information in the Attestation Form would be disqualification, and is likely to render the candidate unfit for employment under the government.</p> <p style="margin: 0;">2. If detained, arrested prosecuted, bound down, fines, convicted, debarred, acquitted etc. subsequent to the completion and submission of this form, the details should be communicated immediately to the authorities to whom the Attestation Form has been sent early, failing which it will be deemed to be a suppression of factual information.</p> <p style="margin: 0;">3. If, the fact that false information has been furnished or that there has been suppression of any factual information in the Attestation Form comes to notice at any time during the service of a person his/her services would be liable to be terminated.”</p>		
1.	Name in full (in block capitals) with aliases, if any, (Please indicate if you have added or dropped in any stage, any part of your name or surname)	Surname	Name	
2.	Present Address in full (i.e. Village, Thana & District, or House No., Lane/Street/Road & Town)			
3(a)	Home Address in full (i.e. Village, Thana & District, or House No., Lane/Street/Road & Town and name of District Headquarters)			
(b)	If originally a resident of Pakistan/Bangladesh (erstwhile East Pakistan) the address in that country and the date of migration to Indian Union.			
4.	Adhar Card No. (if available)			
5.	PAN No. (if available)			
6.	Nationality			
7(a)	Date of Birth			
(b)	Present age ( <b>As on 01.08.2025</b> )			
(c)	Age at Matriculation			
8(a)	Place of birth, district and state in which situated			
(b)	District and State to which you belong			
(c)	District and State to which your father originally belong			

9(a)	Your Religion					
(b)	Are you a member of a Scheduled Caste/Scheduled Tribe/ Other Backward Classes? (Answer Yes/No)					
10.	Particulars of places (with periods of residence) where you have resided for <b>more than one year</b> at a time during the <b>proceeding five years</b> . In case of stay abroad (including Pakistan), particulars of all places where you have resided for more than one year after attaining the age of 21 years should be given.					
	From	To	Residential Address in Full (i.e. Village, Thana & District or House No., Lane/Street/ Road & Town		Name of the District Head Quarter or the place mentioned in preceding column	
11.	Name (in full & aliases if any	Nationality (by birth & or by domicile)	Place of birth	Occupation if employed give designation & official address	Present postal address (if dead give last address	Permanent Home address
(a) Father						
(b) Mother						
(c) Spouse						
12.	Information to be furnished with regard to son(s) and/or daughter(s) in case they are studying/living in a foreign country:					
	Name	Nationality by birth & or by domicile	Place of birth	Country in which studying/living with full address	Date from which studying/living in the country mentioned in the previous column	

13	Educational Qualification showing places of education with years in Schools and Colleges since 15 <sup>th</sup> year of age:		
Name of School/College (with full address)	Date of Entering	Date of Leaving	Examination Passed

14.(a)	Are you holding or have any time held an appointment under Central or State Government or a Semi Government or a Quasi Government body or an Autonomous Body or a Public Sector Undertaking or a Private Firm or Institution? If so, give full particulars with date of employment up-to-date:
--------	--

Period		Designation, emoluments & nature of employment	Full name & address of employer	Reasons for leaving previous service
From	To			

14.(b)	<p>If the previous employment was under the Government of India/ a State Government undertaking owned or controlled by the Government of India or a State Government/ and Autonomous Body/ University/ Local Body.</p> <p>If you had left service on giving a month's notice under Rule 5 of the Central Civil Services (Temporary Service) Rules, 1965, or any similar corresponding rules, were any disciplinary proceedings framed against you, or had you been called upon to explain your conduct in any matter at the time you gave notice of termination of services, or at a subsequent date(s), before your service actually terminated?</p>
--------	---

15.(i)	(a)	Have you ever been kept under detention?	Yes	No
	(b)	Have you ever been arrested?	Yes	No
	(c)	Have you ever been prosecuted? (i.e. has a charge sheet in a criminal case been filed against you in any court of law)	Yes	No
	(d)	Is any criminal case pending against you in any Court of Law at the time of filling up this Attestation Form?	Yes	No

	(e)	Have you ever been convicted by a Court of Law for any Offence?	Yes	No
	(f)	Whether discharged/expelled/withdrawn from any training/institution under the Government or otherwise?	Yes	No
	(g)	Have you ever been rusticated by any University or any other educational authority/institution?	Yes	No
	(h)	Have you ever been debarred/ disqualified by any Public Service Commission/Staff Selection Commission for any of its examination/selection?	Yes	No
(ii)	If the answer to any of the above mentioned question is 'Yes' give full particulars of the case/arrest/detention/fine/conviction/sentence/ punishment etc and/or the nature of the case pending in the Court/University/Educational Authority etc at the time of filling up this attestation form:			
Note:	(i)	Please also see the 'WARNING' at the top of this Attestation Form.		
	(ii)	Specific answers to each of the questions should be given by striking out 'Yes' or 'No' as the case may be		
16.		Name and complete address of two responsible person of your locality or two references to whom you are known	(1)	
			(2)	

### DECLARATION

I certify that the foregoing information is correct and complete to the best of my knowledge and belief.

I am fully aware that by providing false information or suppressing material information while filling this form, the authorities have full right to terminate my appointment letter and I am also liable for appropriate criminal/civil/legal action as a consequence.

I am not aware of any circumstances which might impair my fitness for employment under Government.

Signature of Candidate:

Date:

Place:

## **IDENTITY CERTIFICATE**

(Certificate to be signed by any one of the following)

- i      Gazetted Officer of Central or State Government;
- ii     Stipendiary Magistrate

Certified that I have known Shri / Smt./ Kumari. \_\_\_\_\_  
\_\_\_\_\_ Son/Daughter of Shri \_\_\_\_\_  
for the last \_\_\_\_\_ Years \_\_\_\_\_ months and that to the best of my  
knowledge and belief the particulars furnished by him / her are correct.

Date \_\_\_\_\_

Signature \_\_\_\_\_

Place \_\_\_\_\_

Designation of status and address

Office Seal

### **TO BE FILLED BY THE OFFICE**

(i) Name, Designation and full address of  
the appointment authority.

(ii) Post for which the candidate is being considered.

## CERTIFICATE OF CHARACTER

Certified that I have known Shri/Smt./Ms. \_\_\_\_\_  
S/D/o Shri \_\_\_\_\_ for the last  
\_\_\_\_\_ years \_\_\_\_\_ months and that to the best of my knowledge  
and belief he/she bears reputable character and has not antecedents which  
render him/her unsuitable for Government Employment.

2. Shri/Smt./Ms. \_\_\_\_\_ is not related to me.

Place : \_\_\_\_\_

\*Signature \_\_\_\_\_

Date : \_\_\_\_\_

Name and Designation \_\_\_\_\_

(\* By a Gazetted Officer of the  
Central or State Government or  
Stipendiary Magistrate)

Office Seal

DECLARATION TO BE OBTAINED FROM THE NEW ENTRANTS  
TO GOVERNMENT SERVICE

I, Shri/Smt./Kumari \_\_\_\_\_  
declares as under:

- i) that I am unmarried/a widower/ a widow.
- ii) that I am married and have only one spouse living.
- iii) that I have entered into or contracted a marriage with a person having a spouse living. Application for grant of exemption is enclosed.
- iv) that I have entered into and contracted a marriage with another person during the life time of my spouse. Application for grant of exemption is enclosed.

2. I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date \_\_\_\_\_

Signature \_\_\_\_\_

\* Please delete clause/clauses not applicable.